



Child Care and Development Fund (CCDF) Plan

For

State/Territory: Mississippi

FFY 2014-2015

This Plan describes the CCDF program to be administered by the State/Territory for the period 10/1/2013 – 9/30/2015. As provided for in the applicable statutes and regulations, the Lead Agency has the flexibility to modify this program at any time, including amending the options selected or described.

For purposes of simplicity and clarity, the specific provisions printed herein of applicable laws and regulations are sometimes paraphrases of, or excerpts and incomplete quotations from, the full text. The Lead Agency acknowledges its responsibility to adhere to them regardless of these modifications.

Public reporting burden for this collection of information is estimated to average 162.5 hours per response, including the time for reviewing instructions, gathering and maintaining the data needed, and reviewing the collection of information.

An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number.

Form ACF-118 Approved OMB Number 0970-0114 expires 05/31/2016

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PART 1

ADMINISTRATION

This section provides information on how the CCDF program is administered, including the designated Lead Agency, funding information, the administrative structure, program integrity and accountability policies and strategies, coordination efforts, and emergency preparedness plans and procedures.

1.1 Contact Information

The agency shown below has been designated by the Chief Executive Officer of the State (or Territory), to represent the State (or Territory) as the Lead Agency. The Lead Agency agrees to administer the program in accordance with applicable Federal laws and regulations and the provisions of this Plan, including the assurances and certifications appended hereto. (658D, 658E)

1.1.1 Who is the Lead Agency designated to administer the CCDF program?

Identify the Lead Agency and Lead Agency's Chief Executive Officer designated by the State/Territory. ACF will send official grant correspondence such as grant awards, grant adjustments, Plan approvals and disallowance notifications to the designated contact identified here. (658D(a), §98.10)

Name of Lead Agency: [Mississippi Department of Human Services](#)
Address of Lead Agency: [750 North State Street, Jackson, Mississippi 39202](#)
Name and Title of the Lead Agency's Chief Executive Officer: [Mr. Richard Berry, Executive Director](#)
Phone Number: [601-359-4480](#)
Fax Number: [601-359-4910](#)
E-Mail Address: Richard.Berry@mdhs.ms.gov
Web Address for Lead Agency (if any): www.MDHS.ms.gov

1.1.2. Who is the CCDF administrator?

Identify the CCDF administrator designated by the Lead Agency, the day-to-day contact, with responsibility for administering the State/Territory's CCDF program. ACF will send programmatic communications such as program announcements, program instructions, and data collection instructions to the designated contact identified here. **If there is more than one designated contact with equal or shared responsibility for administering the CCDF program, please identify the co-administrator or entity with administrative responsibilities and include contact information. (§§98.16(a) and (c)(1))**

a) Contact Information for CCDF Administrator:

Name of CCDF Administrator: [Jill Dent](#)
Title of CCDF Administrator: [Director, MDHS Division of Early Childhood Care & Development](#)

Address of CCDF Administrator: [750 North State Street, Jackson, Mississippi 39202](#)
Phone Number: [601-359-4555](#)
Fax Number: [601-359-4422](#)
E-Mail Address: Jill.Dent@mdhs.ms.gov
Phone Number for CCDF program information (for the public) (if any):
[1-800-877-7882](#)
Web Address for CCDF program (for the public) (if any):
www.childcareinfo.ms
Web address for CCDF program policy manual: (if any):
www.childcareinfo.ms
Web address for CCDF program administrative rules: (if any):
www.childcareinfo.ms

b) Contact Information for CCDF Co-Administrator (if applicable):

Name of CCDF Co-Administrator: NA
Title of CCDF Co-Administrator: _____
Address of CCDF Co-Administrator: _____
Phone Number: _____
Fax Number: _____
E-Mail Address: _____
Description of the role of the Co-Administrator: _____

1.2 Estimated Funding

1.2.1. What is your expected level of funding for the first year of the FY 2014 – FY 2015 plan period?

The Lead Agency estimates that the following amounts will be available for child care services and related activities during the 1-year period from October 1, 2013 through September 30, 2014. (§98.13(a)).

FY 2014 Federal CCDF allocation (Discretionary, Mandatory and Matching):
[\\$55,376,741 \(estimate includes Targeted Funds\)](#)
Federal TANF Transfer to CCDF: [\\$Amount pending budget allocation](#)
Direct Federal TANF Spending on Child Care: [\\$0.00](#)
State CCDF Maintenance-of-Effort Funds: [\\$1,715,430](#)
State Matching Funds: [\\$5,467,153](#)

Reminder – Lead Agencies are reminded that not more than 5 percent of the aggregate CCDF funds, including federal funds and required State Matching funds, shall be expended on administration costs (§98.52) once all FY2014 funds have been liquidated. State Maintenance-of-Effort funds are not subject to this limitation.

1.2.2. Which of the following funds does the Lead Agency intend to use to meet the CCDF Matching and maintenance-of-effort (MOE) requirements described in 98.53(e) and 98.53(h)?

Check all that apply. Territories not required to meet CCDF Matching and MOE requirements should mark ☐ N/A here.

Note: The Lead Agency must check at least public and/or private funds as matching, even if pre-kindergarten (pre-k) funds also will be used.

☒ Public funds to meet the CCDF Matching Fund requirement. Public funds may include any general revenue funds, county or other local public funds, State/Territory-specific funds (tobacco tax, lottery), or any other public funds.

If checked, identify source of funds: [State General Fund and fees/funds collected by the Mississippi Department of Health for licensing and regulatory infractions. These funds collected consist of license application and renewal fees.](#)

If known, identify the estimated amount of public funds the Lead Agency will receive: [\\$7.6 M](#)

☒ Private donated funds to meet the CCDF Matching Funds requirement. Only private funds received by the designated entities or by the Lead Agency may be counted for match purposes. (98.53(f))

If checked, are those funds:

☐ donated directly to the State?

☒ donated to a separate entity(ies) designated to receive private donated funds?

If checked, identify the number of entities designated to receive private donated funds and provide name, address, contact, and type

[Children's Defense Fund
Southern Regional Office Headquarters
2659 Livingston Road, Suite 200
Jackson, MS 39213
Director, Oleta Fitzgerald
601-321-1966
OFitzgerald@childrensdefense.org
Non-profit Agency](#)

If known, identify the estimated amount of private donated funds the Lead Agency will receive: \$ [Exact figure depends on availability of funds, if utilized to draw down additional federal funding.](#)

☐ State expenditures for pre-k programs to meet the CCDF Matching Funds requirement. If checked,

Provide the estimated percentage of Matching Fund requirement that will be met with pre-k expenditures (not to exceed 30%): _____

If percentage is more than 10% of the Matching fund requirement, describe how the State will coordinate its pre-k and child care services: _____

If known, identify the estimated amount of pre-k funds the Lead Agency will receive for Matching Funds requirement: \$ _____

Describe the Lead Agency efforts to ensure that pre-k programs meet the needs of working parents: _____

☐ State expenditures for pre-k programs to meet the CCDF Maintenance of Effort (MOE) requirements. If checked,

☐ The Lead Agency assures that its level of effort in full-day/full-year child care services has not been reduced, pursuant to 98.53(h)(1). Estimated percentage of MOE Fund requirement that will be met with pre-k expenditures (not to exceed 20%): _____

If percentage is more than 10% of the MOE requirement, describe how the State will coordinate its pre-k and child care services to expand the availability of child care: _____

If known, identify the estimated amount of pre-k funds the Lead Agency will receive for MOE Fund requirement: \$_____

Describe the Lead Agency efforts to ensure that pre-k programs meet the needs of working parents: _____

1.2.3 Describe the activities for which quality funds (including targeted quality funds for infants and toddlers, school-age children, and resource and referral) will be used in FY 2014 - 2015. Note: Funding estimate is limited to FY 2014. In as much detail possible, list the activities that will be funded, the estimated amount of CCDF quality funds that will be used for each activity, and how these activities relate to the Lead Agency's overall goal of improving the quality of child care for low-income children.

| Estimated Amount of CCDF Quality Funds For FY 2014 | Activity (Lead Agency should include description of quality activities that cover FY 2014 and also information about activities for FY 2015, if available) | Purpose | Projected Impact and Anticipated Results (if possible) |
|--|--|---------|--|
| | | | |

| Estimated Amount of CCDF Quality Funds For FY 2014 | Activity (Lead Agency should include description of quality activities that cover FY 2014 and also information about activities for FY 2015, if available) | Purpose | Projected Impact and Anticipated Results (if possible) |
|---|---|--|--|
| Infant/Toddler Targeted Funds <u>\$1,500,000</u> | Activities funded with Infant/Toddler Targeted funds include A) the provision of child care at job centers for parents seeking employment; B) a portion of child care licensure activities; C) on-site training and technical assistance to unlicensed family child care providers; and D) a pilot QRIS program for unlicensed family child care providers. | A) This program provides child care services for individuals engaged in job search activities at a local WIN Job Center. B) A portion of the Division of Child Care Licensure, MS Department of Health is funded with these targeted funds C) This program provides educational training and technical assistance to unlicensed in-home and family daycare childcare providers that offer fullday, full-year child care services to eligible families. D) This program assesses the level of quality of participating unlicensed family child care homes. | A) The Lead Agency anticipates that this program will support parents in gaining employment, thereby increasing family stability and self-sufficiency. B) The Lead Agency anticipates that the application of rules and regulations governing child care centers will support the provision of safe care environments for all children enrolled. C) The Lead Agency anticipates that this program will result in higher quality care in unlicensed family child care homes. D) The Lead Agency anticipates that this program will evaluate the level of care offered in unlicensed family child care homes, and support increases in program quality. |

| Estimated Amount of CCDF Quality Funds For FY 2014 | Activity (Lead Agency should include description of quality activities that cover FY 2014 and also information about activities for FY 2015, if available) | Purpose | Projected Impact and Anticipated Results (if possible) |
|--|--|--|--|
| School-Age/Child Care Resource and Referral Targeted Funds <u>\$273,000</u> | Activities funded with School Age Targeted Funds include a pilot Out-of-school QRIS program. | This program assesses the level of quality of participating programs serving school-aged children. | The Lead Agency anticipates that this program will evaluate the level of care offered in programs serving school-aged children, and support increases in program quality. |
| Quality Expansion Targeted Funds <u>\$2,600,000</u> | Activities funded with Quality Expansion Targeted Funds include A) on-site training and technical assistance; and B) project-based programming for school-aged children. | A) These programs offer on-site training and technical assistance to all staff in licensed childcare centers in the areas of classroom/instructional quality, nutrition & physical activity, administration and leadership skills. B) This program offers quality programming for school-aged children with a community-based approach. | A) The Lead Agency anticipates that these programs will support lasting changes leading to adoption of best practices and increased quality of care. B) The Lead Agency anticipates that this program will offer a rich educational program that expands children's knowledge and increases their skills in a variety of areas. |

| Estimated Amount of CCDF Quality Funds For FY 2014 | Activity (Lead Agency should include description of quality activities that cover FY 2014 and also information about activities for FY 2015, if available) | Purpose | Projected Impact and Anticipated Results (if possible) |
|---|---|--|--|
| <u>Quality Funds (not including Targeted Funds)</u> | Activities funded with Quality Funds include A) professional development; B) training and technical assistance for children with special needs; and C)) a portion of child care licensure activities. | A) These programs offer professional development opportunities for child care program staff and directors including CDA and other professional credentials and professional conferences. B) This program offers training and technical assistance, including a professional credential for child care staff regarding inclusion of children with special needs. C) A portion of the Division of Child Care Licensure, MS Department of Health is funded with these targeted funds. | A) The Lead Agency anticipates that these programs will increase the educational level of child care staff, and overall professional development. In addition, a series of professional development conferences designed to support continued education. B) The Lead Agency anticipates that this program will increase competency of child care providers in addressing the needs of children with special needs. C) The Lead Agency anticipates that the application of rules and regulations governing child care centers will support the provision of safe care environments for all children enrolled. |

1.2.4 Will the Lead Agency distribute quality funds to counties or local entities?

Note: This question is to obtain information on whether the Lead Agency retains decision making responsibilities regarding the quality dollars at the State/Territory level or if funds are distributed to local entities.

Does the State maintain decisions at the State level, or are funds distributed to locals that have some decisions on how funds are spent.

- ☒ No, the Lead Agency will not distribute any quality funds directly to local entities
- ☐ Yes, all quality funds will be distributed to local entities
- ☐ Yes, the Lead Agency will distribute a portion of quality funds directly to local entities. Estimated amount or percentage to be distributed to localities _____
- ☒ Other. Describe. **The Lead Agency does have slot contractors in place that receive subsidy funds in reimbursement of care provided as a function of their contract.**

1.3. CCDF Program Integrity and Accountability

Program integrity is defined to include efforts that ensure effective internal controls over the administration of CCDF funds. The Lead Agency is responsible for monitoring programs and services, ensuring compliance with the rules of the program, promulgating rules and regulations to govern the overall administration of the plan and oversee the expenditure of funds by sub-grantees and contractors. (§ 98.11(b)) Accountability measures should address administrative error, which includes unintentional agency error, **as well as address** program violations, both unintentional and intentional, that may or may not result in further action by the Lead Agency, including those cases suspected of and/or prosecuted for fraud.

1.3.1. Describe the strategies the Lead Agency will utilize to ensure effective internal controls are in place.

The **description** of internal controls may include, but is not limited to a description of processes to ensure sound fiscal management, to identify areas of risk or to establish regular evaluation of control activities.

Over the last four years, the Lead Agency has been dedicated to reducing errors in reporting, administrative processes, and payment for services. Strategies adopted under this plan will reflect a continuation of this ongoing effort. Strategies identified to ensure effective internal controls include, but are not limited to:

- 1. Developing Case Review Assessment tool for use in monitoring case files.**
- 2. Conducting quarterly reviews of case files using the Case Review Assessment to ensure accuracy in adherence to administrative policies.**
- 3. Holding targeted staff training to address errors identified by the Case Review Assessment process.**

4. Conducting quarterly reviews of cases for Improper Payment Review.
5. Utilizing reports from CCIS to monitor program activity including additions, terminations, expenditures, and obligations.
6. Monthly training offered to staff on policies and procedures.
7. Continued use of electronic systems to calculate face values for authorizations and payments to providers.

The State's Office of the State Auditor engages all divisions of the Mississippi Department of Human Services in ongoing audits. These audits include reviews of casefiles to ensure proper expenditure of funds. Upon completion of an audit, a meeting is held to discuss findings and plan to address any weaknesses in program operation before initiating the next audit.

1.3.2 Describe the processes the Lead Agency will use to monitor all sub-recipients.

Lead Agencies that use other governmental or non-governmental sub-recipients to administer the program must have written agreements in place outlining roles and responsibilities for meeting CCDF requirements (98.11 (a) (3))

Definition: A sub-recipient (including a sub-contractor and or sub-grantee) is a non-Federal entity that expends Federal awards (contract or grant) received from another entity to carry out a Federal program, but does not include a vendor nor does it include an individual who is a beneficiary of such a program. [OMB Circular A-133](#) Section 210 provides additional information on the characteristics of a **sub-recipient** and **vendor**.

The description of monitoring may include, but is not limited to, a discussion of written agreements, fiscal management, review of policies and procedures to ensure compliance with CCDF regulations, monitoring/auditing contractors or grantees to ensure that eligible children are served and eligibility documentation is verified, and establishing performance indicators or measures related to improper payments.

The Lead Agency has in place subcontracts with various entities to provide child care slots. These subcontractors are monitored by the Mississippi Department of Human Services Division of Program Integrity in accordance with the regulations established for all entities engaged in contract services for the Lead Agency. These regulations can be found in the MDHS Subgrant/Contract Manual located at, http://www.mdhs.state.ms.us/pdfs/dpimanual/dpi_submanual.pdf.

Annual monitoring of subcontractors by the MDHS Division of Program Integrity includes a review of eligibility processes and requests for payment to ensure adherence to state and federal policies. Any findings as a result of the monitoring are settled in accordance with the established policies in the MDHS Subgrant/Contract Manual.

1.3.3. Describe the activities the Lead Agency will have in place to identify program violations and administrative error to ensure program integrity using the chart below.

Program violations may include intentional and unintentional client and/or provider violations as defined by the Lead Agency. Administrative error refers to **areas identified through the Error Rate Review** process (98.100). Check which activities, if any, the Lead Agency has chosen to conduct.

| Type of Activity | Identify Program Violations | Identify Administrative Error |
|---|-------------------------------------|-------------------------------------|
| Share/match data from other programs (e.g. TANF, Child and Adult Care Food Program (CACFP), Food and Nutrition Service (FNS), Medicaid)) | <input type="checkbox"/> | <input type="checkbox"/> |
| Share/match data from other databases (e.g., State Directory of New Hires, Social Security Administration, Public Assistance Reporting Information System (PARIS)) | <input type="checkbox"/> | <input type="checkbox"/> |
| Run system reports that flag errors Errors that would be identified through these reports include, but are not limited to children who have aged out of eligibility, authorizations attached to a provider left incomplete, authorizations that have expired but were not terminated, incomplete provider profiles, and fraud reports. | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> |
| Review of attendance or billing records | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> |
| Audit provider records | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> |
| Conduct quality control or quality assurance reviews | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> |
| Conduct on-site visits to providers or sub-recipients to review attendance or enrollment documents | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Conduct supervisory staff reviews | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| Conduct data mining to identify trends | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> |
| Train staff on policy and/or audits | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> |
| Other. Describe _____ | <input type="checkbox"/> | <input type="checkbox"/> |
| None | <input type="checkbox"/> | <input type="checkbox"/> |

For any option the Lead Agency checked in the chart above other than none, please describe

The Lead Agency will utilize the Child Care Information System (CCIS) to produce reports queried to help identify trends in the data, staff performance, and error rates. CCIS allows for case management and fiscal monitoring.

The Lead Agency's CCIS interfaces daily with the information system housing TANF data to collect referrals and terminations of child care subsidy. This interface helps ensure timely and accurate access to subsidy services.

If the Lead Agency checked none, please describe what measures the Lead Agency has or plans to put in place to address program integrity:

1.3.4. What strategies will the Lead Agency use to investigate and collect improper payments due to program violations or administrative error?

Check and describe in the chart below which strategies, if any, the Lead Agency will use for each of the following areas: Unintentional program violations (UPV), intentional program violations (IPV) and/or fraud, and administrative error as defined in your State/Territory. **The Lead Agency has the flexibility to recover misspent funds as a result of errors. The Lead Agency is required to recover misspent funds as a result of fraud (98.60(i)).**

| Strategy | UPV | IPV and/or Fraud | Administrative Error |
|---|-------------------------------------|-------------------------------------|-------------------------------------|
| Require recovery after a minimum dollar amount in improper payment. Identify the minimum dollar amount \$100 | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Coordinate with and refer to other State/Territory agency (e.g. State/Territory collection agency, law enforcement). Describe _____ | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Recover through repayment plans | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> |
| Reduce payments in subsequent months | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> |
| Recover through State/Territory tax intercepts | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Recover through other means. Describe _____ | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Establish a unit to investigate and collect improper payments. Describe composition of unit The MS Department of Human Services, Division of Program Integrity investigates improper payments. | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> |
| Other. Describe _____ | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| None | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

For any option the Lead Agency checked in the chart above other than none, please describe

[Through the development and implementation of the Child Care Information System \(CCIS\), transactional child care activity can easily be monitored and analyzed to determine the possible misuse of funds, the existence of fraudulent behavior, and the reduction and/or prevention of improper payments. The database system contains several parameters and edit checks designed to reduce the possible occurrence of improper payments.](#)

[The Lead Agency has also developed various internal control fiscal management reports that allow the CCA to obtain a “bird’s eye” view of child care transactions across the State of Mississippi. The reports are structured by federal regulatory guidelines. Subgrantees prepare and submit a monthly report to the Lead Agency,](#)

which are used in the development of monthly internal reports. In addition, the MDHS Department of Budgets and Accounting prepare reports quarterly. Thus, any significant irregularities in child care activity can easily be spotted and appropriate disciplinary actions immediately taken. Once possible improper payments have been identified, the Lead Agency will enact one of the following procedures:

1. If the improper payment is the result of Administrative Error, the CCA is notified and corrective measures are taken to recoup funds. Recoupments are made in 100% of findings related to administrative errors.
2. If the improper payment is the result of either intentional or unintentional program violations, the CCA is notified and the case is forwarded to the MDHS Division of Program Integrity for investigation. Recoupment efforts are made if it is determined that improper payments exceeding \$100.00 exist.

1.3.5. What type of sanction, if any, will the Lead Agency place on clients and providers to help reduce improper payments due to program violations?

☐ None

☒ Disqualify client. If checked, please describe, including a description of the appeal process for clients who are disqualified

Any dispute concerning a question of fact under application/agreement which is not disposed of by agreement of the parties hereto shall be decided by the DECCD Director. In the review by the DECCD Director, the parent/provider shall be afforded an opportunity to be heard and offer evidence in support of the questioned decision under review. This decision shall be reduced to writing and a copy thereof mailed or furnished to the parent/provider and shall be final and conclusive, unless, within thirty (30) days from the date of the decision, the parent/provider mails or furnishes the Executive Director of the Mississippi Department of Human Services a written request for review. Pending final decision of the Executive Director or his designee, the Lead Agency Staff will proceed in accordance with the decision of the DECCD Director.

☒ Disqualify provider. If checked, please describe, including a description of the appeal process for providers who are disqualified

Any dispute concerning a question of fact under application/agreement which is not disposed of by agreement of the parties hereto shall be decided by the DECCD Director. In the review by the DECCD Director, the parent/provider shall be afforded an opportunity to be heard and offer evidence in support of the questioned decision under review. This decision shall be reduced to writing and a copy thereof mailed or furnished to the parent/provider and shall be final and conclusive, unless, within thirty (30) days from the date of the decision, the parent/provider mails or furnishes the Executive Director of

the Mississippi Department of Human Services a written request for review. Pending final decision of the Executive Director or his designee, the Lead Agency Staff will proceed in accordance with the decision of the DECCD Director.

- ☒ Prosecute criminally
☐ Other. Describe. _____

1.3.6. Based on responses provided from Question 14 in the most recent ACF-402 report, please describe those actions the Lead Agency has taken or plans to take to reduce identified errors in the table below.

Territories not required to complete the Error Rate Review should mark ☐ N/A here.

| Activities identified in ACF-402 | Cause/Type of Error (if known) | Actions Taken or Planned | Completion Date (Actual or planned) (if known) |
|--|--------------------------------|---|---|
| The Lead Agency will perform internal reviews of the child care subsidy applications and all related supporting documentation, prior to the issuance of a child care certificate, to ensure accuracy and completeness. In addition, subgrantee training will be conducted on the MDHS Child Care Policy Manual, including but not limited to compliance with federal/state policies and regulation related to the subsidy program, procedures for issuing child care certificates, using CCIS and updated policies/regulations/procedures. | Unknown | <ol style="list-style-type: none"> 1. The Lead Agency will utilize CCIS to review staff workflow and ensure proper implementation according to established program policies. 2. Lead Agency staff is engaged in policy training each month at staff meetings. 3. CCIS prevents program staff from advancing through the eligibility process until all required documentation | <ol style="list-style-type: none"> 1. CCIS updates were completed in January 2013. 2. This process is ongoing. 3. CCIS updates were completed in January 2013. |

| Activities identified in ACF-402 | Cause/Type of Error (if known) | Actions Taken or Planned | Completion Date (Actual or planned) (if known) |
|----------------------------------|--------------------------------|--------------------------------|--|
| | | has been received and entered. | |

1.4. Consultation in the Development of the CCDF Plan

Lead Agencies are required to *consult* with appropriate agencies in the development of its CCDF Plan (§98.12, §98.14(a),(b), §98.16(d)).

Definition: *Consultation* involves the meeting with or otherwise obtaining input from an appropriate agency in the development of the State or Territory CCDF Plan. At a minimum, Lead Agencies must consult with representatives of general purpose local governments. (§§98.12(b), 98.14(a)(1))

1.4.1. Identify and describe in the table below who the Lead Agency consulted with in the development of the CCDF Plan (658D(b)(2), §§98.12(b), 98.14(b)).

| Agency/Entity | | Describe how the Lead Agency consulted with this Agency/entity in developing the CCDF Plan |
|--|--|--|
| <input checked="" type="checkbox"/> | Representatives of general purpose local government (required) This may include, but is not limited to: representatives from counties and municipalities, local human service agencies, local education representatives (e.g., school districts), or local public health agencies. | MDHS DECCD consulted with representatives from the County Board of Supervisors, Cities, towns, and municipalities. Some examples are the City of Jackson, Hancock County Board of Supervisors and the City of Starkville to obtain input on the development of the Mississippi State Plan and other policies and procedures relating to child care. Coordination involves child care and early childhood development services, utilizing certified spending offered by local or county government, state agencies, and municipalities as match for CCDF funds. |
| For the remaining agencies, check and describe (optional) any which the Lead Agency has chosen to consult with in the development of its CCDF Plan. | | |
| <input checked="" type="checkbox"/> | State/Territory agency responsible for public | Representatives are members of |

| Agency/Entity | | Describe how the Lead Agency consulted with this Agency/entity in developing the CCDF Plan |
|-------------------------------------|--|--|
| <input type="checkbox"/> | education This may include, but is not limited to, State/Territory pre-kindergarten programs (if applicable), programs serving school-age children (including 21 st Century Community Learning Centers), or higher education. | the Mississippi Early Childhood Advisory Council. All Council members were provided with copies of the draft State Plan for their comments and recommendations. |
| <input checked="" type="checkbox"/> | State/Territory agency responsible for programs for children with special needs This may include, but is not limited to: State/Territory early intervention programs authorized under the Individuals with Disabilities Education Act (Part C for infants and toddlers and Section 619 for preschool), or other State/Territory agencies that support children with special needs | Representatives are members of the Mississippi Early Childhood Advisory Council. All Council members were provided with copies of the draft State Plan for their comments and recommendations. |
| <input checked="" type="checkbox"/> | State/Territory agency responsible for licensing (if separate from the Lead Agency) | Representatives are members of the Mississippi Early Childhood Advisory Council. All Council members were provided with copies of the draft State Plan for their comments and recommendations. |
| <input checked="" type="checkbox"/> | State/Territory agency with the Head Start Collaboration grant | Representatives are members of the Mississippi Early Childhood Advisory Council. All Council members were provided with copies of the draft State Plan for their comments and recommendations. |
| <input checked="" type="checkbox"/> | Statewide Advisory Council authorized by the Head Start Act | All members of the Council were provided with the link to the draft State Plan in order to collect feedback and input on finalizing its development. |
| <input checked="" type="checkbox"/> | Other Federal, State, local, Tribal (if applicable), and/or private agencies providing early childhood and school-age/youth-serving developmental services | Representatives are members of the Mississippi Early Childhood Advisory Council. All Council members were provided with copies of the draft State Plan for their comments and recommendations. |
| <input type="checkbox"/> | State/Territory agency responsible for the Child and Adult Care Food Program (CACFP) | |
| <input checked="" type="checkbox"/> | State/Territory agency responsible for implementing the Maternal and Early Childhood Home Visitation programs grant | The Lead Agency is the recipient of these funds. |

| Agency/Entity | Describe how the Lead Agency consulted with this Agency/entity in developing the CCDF Plan |
|---|--|
| <input checked="" type="checkbox"/> State/Territory agency responsible for public health (including the agency responsible for immunizations and programs that promote children's emotional and mental health) | Representatives are members of the Mississippi Early Childhood Advisory Council. All Council members were provided with copies of the draft State Plan for their comments and recommendations. |
| <input checked="" type="checkbox"/> State/Territory agency responsible for child welfare | Copies of the draft were provided to the Director of MDHS Division of Family & Children's Services for comments and recommendations. |
| <input type="checkbox"/> State/Territory liaison for military child care programs or other military child care representatives | |
| <input type="checkbox"/> State/Territory agency responsible for employment services/workforce development | |
| <input checked="" type="checkbox"/> State/Territory agency responsible for Temporary Assistance for Needy Families (TANF) | Copies of the draft were provided to the Director of MDHS Division of Field Operations for comments and recommendations. |
| <input checked="" type="checkbox"/> Indian Tribes/Tribal Organizations <input type="checkbox"/> N/A: No such entities exist within the boundaries of the State | Copies of the draft State Plan were provided to the Tribal Organization for comments and recommendations. The Lead Agency met with representatives of the Tribe to discuss changes and requirement of State Plan submission. |
| <input type="checkbox"/> Private agencies/entities including national initiatives that the Lead Agency is participating in such as BUILD, Strengthening Families, Mott Statewide After-school Networks, Ready by 21 | The State Administrator attended two meetings hosted by BUILD in which various policy initiatives were discussed. |
| <input checked="" type="checkbox"/> Provider groups, associations or labor organizations | Representatives are members of the Mississippi Early Childhood Advisory Council. All Council members were provided with copies of the draft State Plan for their comments and recommendations. |
| <input type="checkbox"/> Parent groups or organizations | |
| <input checked="" type="checkbox"/> Local community organizations and institutions (child care resource and referral, Red Cross) | Representatives are members of the Mississippi Early Childhood Advisory Council. All Council |

| Agency/Entity | Describe how the Lead Agency consulted with this Agency/entity in developing the CCDF Plan |
|--------------------------------|---|
| | members were provided with copies of the draft State Plan for their comments and recommendations. |
| <input type="checkbox"/> Other | |

1.4.2. Describe the Statewide/Territory-wide public hearing process held to provide the public an opportunity to comment on the provision of child care services under this Plan. (658D(b)(1)(C), §98.14(c))

At a minimum, the description should include:

- a) Date(s) of notice of public hearing: [05/21/2013](#)
Reminder - Must be at least 20 days prior to the date of the public hearing.
- b) How was the public notified about the public hearing?
[The notice was placed on the Lead Agency's website on 05/21/2013. An email notice was sent to SECAC members on 05/22/2013. An ad ran in 12 newspapers across the state on 05/28/2013 and 06/04/2013](#)
- c) Date(s) of public hearing(s): [06/17/2013](#)
Reminder - Must be no earlier than 9 months before effective date of Plan (October 1, 2013).
- d) Hearing site(s): [Mississippi Public Broadcasting Auditorium
3825 Ridgewood Road
Jackson, MS 39211](#)
- e) How was the content of the Plan made available to the public in advance of the public hearing(s)?
[A draft of the Plan was made available to all parties through the Lead Agency's website.](#)
- f) How will the information provided by the public be taken into consideration in the provision of child care services under this Plan?
[All comments received from the public will be compiled and reviewed by the State Administrator. Any comments that can support the strengthening of the Plan will be incorporated where possible.](#)

1.4.3. Describe any strategies used by the Lead Agency to increase public consultation on the Plan or access to the public hearing.

For example, translating the public hearing notice into multiple languages, using a variety of sites or technology (e.g., video) for the public hearing, holding the hearing at times to accommodate parent and provider work schedules.

[Based on the Lead Agency's experience with holding public hearings, those meetings held in the afternoon have produced the greatest turnout. The public hearing to collect comments from interested parties is scheduled from 1:00-4:00 PM in order to offer adequate time for response. The Lead Agency also solicited comments on the](#)

Plan from interested parties through email. This address was posted on the Lead Agency's website and in newspapers.

In accordance with the Mississippi Secretary of State's Office, the Lead Agency will hold an additional hearing on the State Plan, as per usual filing procedures. At the time of Plan submission, this meeting is scheduled for September 23, 2013 from 12:00 PM to 2:00 PM at the Hinds County Extension Service Office in Jackson, Mississippi.

1.5. Coordination Activities to Support the Implementation of CCDF Services

Lead Agencies are required to *coordinate* with other Federal, State, local, Tribal (if applicable) and private agencies providing child care and early childhood development services (§98.12, §98.14(a),(b), §98.16(d)).

Definition - *Coordination* involves child care and early childhood and school-age development services efforts to work across multiple entities, both public and private (such as in connection with a State Early Childhood Comprehensive System (SECCS) grant or the State Advisory Council funded under the Head Start Act of 2007). (658D(b)(1)(D), §§98.12(a), 98.14(a)(1))

Note: Descriptions of [how governments are organized for each State](#) are provided at census.gov.

1.5.1. Identify and describe in the table below with whom the Lead Agency coordinates in the delivery of child care and early childhood and school-age services (§98.14(a)(1)).

| Agency/Entity (check all that apply) | Describe how the Lead Agency will coordinate with this Agency/entity in delivering child care and early childhood services | Describe results expected from the coordination Examples might include increased supply of full- day/full-year services, aligned eligibility policies, blended funding, or access to more training and technical assistance resources shared across agencies. |
|--|--|--|
| <input checked="" type="checkbox"/> Representatives of general purpose local government <input type="checkbox"/> This may include, but is not limited to: representatives from counties and municipalities, local education representatives, | The Lead Agency is the recipient of the Maternal, Infant and Child Health home visiting funds. Through the implementation of this program, | The Lead Agency will coordinate with these entities to increase access to community resources such as TANF, SNAP, WIC, Medicaid, child care |

| Agency/Entity (check all that apply) | | Describe how the Lead Agency will coordinate with this Agency/entity in delivering child care and early childhood services | Describe results expected from the coordination |
|---|---|--|--|
| | or local public health agencies. | coordination with LEAs, county health departments, county DHS offices, local law enforcement and local government representatives will be imperative. | subsidy, CHiP, immunizations, child support, GED and alternative education options. |
| <input checked="" type="checkbox"/> | State/Territory agency responsible for public education (required) This may include, but is not limited to, State/Territory pre-kindergarten programs (if applicable), programs serving school-age children (including 21 st Century Community Learning Centers), or higher education; | The Lead Agency funds the Out-of-School Project which works with public and private school age care providers to offer mentoring and quality evaluation. | The Lead Agency's support of this program will result in increased support for and quality of existing school age care services. |
| <input checked="" type="checkbox"/> | Other Federal, State, local, Tribal (if applicable), and/or private agencies providing early childhood and school-age/youth-serving developmental services (required) | Coordination will be achieved through the Lead Agency's participation in the Mississippi Department of Health's Expanding Opportunities Initiative. | Through participation, the Lead Agency is working to increase the number of quality inclusive learning environments for children with special needs. |

| Agency/Entity (check all that apply) | | Describe how the Lead Agency will coordinate with this Agency/entity in delivering child care and early childhood services | Describe results expected from the coordination |
|---|--|--|---|
| <input checked="" type="checkbox"/> | State/Territory agency responsible for public health (required) This may include, but is not limited to, the agency responsible for immunizations and programs that promote children's emotional and mental health | Coordination is achieved through participation on the MS Department of Health, Division of Child Care Licensure Board and through partnership on the Maternal, Infant, and Child Health Home Visitation Grant. All licensed providers are required by MS Dept. of Health licensure regulations to have copies of immunizations for staff and children. This group monitors the presence of these records for the Lead Agency during onsite visits with these programs. | Through this collaboration, the Lead Agency is working to strengthen the health and safety of home and child care environments for children across the state. |
| <input checked="" type="checkbox"/> | State/Territory agency responsible for employment services / workforce development (required) | Coordination will include the MSCCR&R's child care provider professional development registry, CDA mentoring and scholarship program, child care director's credentialing program and the Mississippi Longitudinal Data System. Currently, an | The Lead Agency expects to examine data across these programs to determine how assistance in workforce development can be provided. |

| Agency/Entity (check all that apply) | | Describe how the Lead Agency will coordinate with this Agency/entity in delivering child care and early childhood services | Describe results expected from the coordination |
|---|---|---|--|
| | | agreement is in place for students who have earned a CDA that includes an alignment of CDA credentials and requirements for an AA in state community colleges. | |
| <input checked="" type="checkbox"/> | State/Territory agency responsible for providing Temporary Assistance for Needy Families (TANF) including local human service agencies(required) | Currently, the Lead Agency is coordinating with the MDHS Division of Field Operations (formerly Economic Assistance) on the development of a centralized application for child care subsidy and TANF. Additionally, the Lead Agency has created a data interface with TANF in order to receive referrals and terminations for subsidy on a daily basis. | The Lead Agency expects the use of a centralized application to decrease the enrollment period and allow for expedited service delivery. The Lead Agency has seen reduced wait time for new TANF client in receipt of subsidy services through the implementation of inter-divisional system interfaces. |
| <input checked="" type="checkbox"/> | Indian Tribes/Tribal Organizations (required) <input type="checkbox"/> N/A: No such entities exist within the boundaries of the State | Coordination is achieved by working with Tribal Organization representatives serving on the Mississippi Early Childhood Advisory Council and through meetings. | The Lead Agency's goal is to ensure all populations' needs are represented through the work of the Council. |

| Agency/Entity (check all that apply) | Describe how the Lead Agency will coordinate with this Agency/entity in delivering child care and early childhood services | Describe results expected from the coordination Examples might include increased supply of full- day/full-year services, aligned eligibility policies, blended funding, or access to more training and technical assistance resources shared across agencies. |
|--|--|--|
| For the remaining agencies, check and describe (optional) any with which the Lead Agency has chosen to coordinate early childhood and school-age service delivery | | |
| <input checked="" type="checkbox"/> | State/Territory agency with the Head Start Collaboration grant | The Lead Agency Coordinates with the Head Start Collaboration Office and the Mississippi Head Start Association. |
| <input type="checkbox"/> | State/Territory agency responsible for Race to the Top – Early Learning Challenge (RTT-ELC) <input checked="" type="checkbox"/> N/A: State/Territory does not participate in RTT-ELC | |
| <input type="checkbox"/> | State/Territory agency responsible for the Child and Adult Care Food Program (CACFP) | |
| <input checked="" type="checkbox"/> | State/Territory agency responsible for programs for children with special needs This may include, but is not limited to: State/Territory early intervention programs authorized under the Individuals with Disabilities Education Act | The Lead Agency Coordinates with the Mississippi Department of Health, Part C Coordinator and funds the Project PREPARE program. The Lead Agency's goal is to improve the number of and access to appropriate inclusive learning environments for children with special needs. |

| Agency/Entity (check all that apply) | Describe how the Lead Agency will coordinate with this Agency/entity in delivering child care and early childhood services | Describe results expected from the coordination Examples might include increased supply of full-day/full-year services, aligned eligibility policies, blended funding, or access to more training and technical assistance resources shared across agencies. |
|---|---|--|
| <input type="checkbox"/> (Part C for infants and toddlers and Section 619 for preschool), or other State/Territory agencies that support children with special needs | | |
| <input checked="" type="checkbox"/> State/Territory agency responsible for implementing the Maternal and Early Childhood Home Visitation programs grant | The Lead Agency is the recipient of these funds. | |
| <input checked="" type="checkbox"/> State/Territory agency responsible for child welfare | The Lead Agency Coordinates with the MDHS Division of Child and Family Services to serve children in foster/protective/preventive care. | The Lead Agency's goal is to provide subsidy to all children in protective and preventive care and foster children. |
| <input type="checkbox"/> State/Territory liaison for military child care programs or other military child care representatives | | |
| <input type="checkbox"/> Private agencies/entities including national initiatives that the Lead Agency is participating in such as BUILD, Strengthening Families, Mott Statewide After-school Networks, Ready by 21 | | |
| <input type="checkbox"/> Local community organizations (child care resource and referral, Red Cross) | | |
| <input type="checkbox"/> Provider groups, associations or labor organizations | | |
| <input type="checkbox"/> Parent groups or organizations | | |

| | | |
|---|---|--|
| Agency/Entity (check all that apply) | Describe how the Lead Agency will coordinate with this Agency/entity in delivering child care and early childhood services | Describe results expected from the coordination Examples might include increased supply of full-day/full-year services, aligned eligibility policies, blended funding, or access to more training and technical assistance resources shared across agencies. |
| <input type="checkbox"/> Other | | |

1.5.2. Does the State/Territory have a formal early childhood and/or school-age coordination plan?

Lead Agencies are not required to have an early childhood nor a school-age coordination plan, but the State/Territory may have such plans for other purposes, including fulfilling requirements of other programs.

- ☐ Yes. If yes,
- a) Provide the name of the entity responsible for the coordination plan(s):
 - b) Describe the age groups addressed by the plan(s):
 - c) Indicate whether this entity also operates as the State Advisory Council (as authorized under the Head Start Act of 2007):
 - ☐ Yes
 - ☐ No
 - d) Provide a web address for the plan(s), if available: _____
- ☒ No

1.5.3. Does the State/Territory have a designated entity(ies) responsible for coordination across early childhood and school-age programs?

(658D(b)(1)(D), §98.14(a)(1))

Check which entity(ies), if any, the State/Territory has chosen to designate.

- ☐ State/Territory-wide early childhood and/or school-age cabinet/advisory council/task force/commission.
 If yes, describe entity, age groups and the role of the Lead Agency _____
- ☒ State Advisory Council (as described under the Head Start Act of 2007).
 If yes, describe entity, age groups and the role of the Lead Agency _____

In 2008, Governor Haley Barbour established the State Early Childhood Advisory Council of Mississippi to develop a strategic plan to coordinate efforts, programs, and resources supporting children birth to five years and to identify opportunities for and barriers to collaboration and coordination among programs and agencies.

The State Child Care Administrator was appointed by former Governor Barbour to serve on this Council. The State Child Care Administrator's appointment was renewed by Governor Phil Bryant, the state's current governor.

☐ Local Coordination/Council

If yes, describe entity, age groups and the role of the Lead Agency

☐ Other.

Describe _____

☐ None

1.5.4. Does the Lead Agency conduct or plan to conduct activities to encourage public-private partnerships that promote private sector involvement in meeting child care needs? (§98.16(d))

☒ Yes. If yes, **describe** these activities or planned activities, including the tangible results expected from the public-private partnership

The Lead Agency plans to continue its non-competitive Child Care Partnership Program. The Child Care Partnership Program is a special initiative developed by DECCD to encourage partnerships in addressing employee/community child care needs. This is a federal matching grant program to encourage local commitment to child care through community-generated financial resources that can be matched with federal funds. Applicants eligible for consideration for a direct subgrant include local or county government, state agencies and municipalities, industries, consortiums and foundations. Some examples of current partnerships include:

- City of Jackson public/public partnerships
- City of Starkville has a public/private partnership
- Hancock County Human Resources Agency public/public partnership
- Hinds Community College public/public partnership
- City of Vicksburg has a public/private partnership

These programs served 736 children last year and projections indicate service to the same number for the upcoming year.

☐ No.

1.6. Child Care Emergency Preparedness and Response Plan

It is recommended, but not required, that each Lead Agency develop a plan to address preparedness, response, and recovery efforts specific to child care services and programs. Plans should cover the following areas: 1) planning for continuation of services to CCDF families; 2) coordination with other State/Territory agencies and key partners; 3) emergency preparedness regulatory requirements for child care providers; 4) provision of temporary child care services after a disaster; and 5)

rebuilding child care after a disaster. For further guidance on developing Child Care Emergency Preparedness and Response Plans see the [Information Memorandum \(CCDF-ACF-IM-2011-01\)](#) located on the Office of Child Care website.

1.6.1. Indicate which of the following best describes the current status of your efforts in this area. Check only ONE.

- ☐ **Planning.** Indicate whether steps are under way to develop a plan. If so, describe the time frames for completion and/or implementation, the steps anticipated and how the plan will be coordinated with other emergency planning efforts within the State/Territory.
- ☒ **Developed.** A plan has been developed as of [03/01/2009](#) and put into operation as of [03/01/2009](#), if available. Provide a web address for this plan, if available: www.mdhs.state.ms.us/eccd_providers1
- ☐ **Other. Describe:** _____

1.6.2. Indicate which of the core elements identified in the Information Memorandum are or will be covered in the Lead Agency child care emergency preparedness and response plan.

Check which elements, if any, the Lead Agency includes in the plan.

- ☒ Planning for continuation of services to CCDF families
- ☒ Coordination with other State/Territory agencies and key partners
- ☒ Emergency preparedness regulatory requirements for child care providers
- ☒ Provision of temporary child care services after a disaster
- ☐ Restoring or rebuilding child care facilities and infrastructure after a disaster
- ☐ None

PART 2

CCDF SUBSIDY PROGRAM ADMINISTRATION

This section focuses on the child care assistance program. Lead Agencies are asked to describe their efforts to inform parents about the CCDF subsidy program and application policies and procedures, eligibility criteria, sliding fee scale, payment rate policies and procedures, and how Lead Agencies ensure continuity of care and parental choice of high quality settings for families.

2.1. Administration of the Program

The Lead Agency has broad authority to administer (i.e., establish rules) and operate (i.e., implement activities) the CCDF program through other governmental, non-governmental, or other public or private local agencies as long as it retains overall responsibility for the administration of the program. (658D(b), §98.11(a))

2.1.1. Which of the following CCDF program rules and policies are set or established at the State/Territory versus the local level?

Identify the level at which the following CCDF program rules and policies are established.

- ☒ Eligibility rules and policies (e.g., income limits) are set by the:
 - ☒ State/Territory
 - ☐ Local entity. If checked, identify the type of policies the local entity(ies) can set _____
 - ☐ Other. Describe: _____
- ☒ Sliding fee scale is set by the:
 - ☒ State/Territory
 - ☐ Local entity. If checked, identify the type of policies the local entity(ies) can set _____
 - ☐ Other. Describe: _____
- ☒ Payment rates are set by the:
 - ☒ State/Territory
 - ☐ Local entity. If checked, identify the type of policies the local entity(ies) can set _____
 - ☐ Other. Describe: _____

2.1.2. How is the CCDF program operated in your State/Territory?

In the table below, identify which agency(ies) performs these CCDF services and activities.

| Implementation of CCDF Services/Activities | Agency (Check all that apply) |
|--|--|
| Who determines eligibility? | <input checked="" type="checkbox"/> CCDF Lead Agency <input type="checkbox"/> TANF agency <input type="checkbox"/> Other State/Territory agency. Describe. _____ |

| Implementation of CCDF Services/Activities | Agency (Check all that apply) |
|---|--|
| Note: If different for families receiving TANF benefits and families not receiving TANF benefits, please describe: _____ | <input type="checkbox"/> Local government agencies such as county welfare or social services departments <input type="checkbox"/> Child care resource and referral agencies <input type="checkbox"/> Community-based organizations <input checked="" type="checkbox"/> Other. Describe. Slot contractors use eligibility guidelines established by the Lead Agency to determine the eligibility of families for a child care slot in their program. |
| Who assists parents in locating child care (consumer education)? | <input checked="" type="checkbox"/> CCDF Lead Agency <input type="checkbox"/> TANF agency <input checked="" type="checkbox"/> Other State/Territory agency. Describe. The Mississippi Department of Health, Division of Child Care Licensure <input type="checkbox"/> Local government agencies such as county welfare or social services departments <input checked="" type="checkbox"/> Child care resource and referral agencies <input type="checkbox"/> Community-based organizations <input type="checkbox"/> Other. Describe. _____ |
| Who issues payments? | <input checked="" type="checkbox"/> CCDF Lead Agency <input type="checkbox"/> TANF agency <input type="checkbox"/> Other State/Territory agency. Describe. _____ <input type="checkbox"/> Local government agencies such as county welfare or social services departments <input type="checkbox"/> Child care resource and referral agencies <input type="checkbox"/> Community-based organizations <input type="checkbox"/> Other. Describe. _____ |
| Describe to whom is the payment issued (e.g., parent or provider) and how are payments distributed (e.g., electronically, cash, etc) | Payments are issued by paper check once per month to providers. |
| Other. List and describe: _____ | |

2.2. Family Outreach and Application Process

Lead Agencies must inform parents of eligible children and the general public of the process by which they can apply for and potentially receive child care services. (658D(b)(1)(A), 658E(c)(2)(D) & (3)(B), §§98.16(k), 98.30(a)-(e). **Note** - For any information in questions 2.2.1 through 2.2.10 that differs or will differ for families receiving TANF, please describe in 2.2.11.

2.2.1. By whom and how are parents informed of the availability of child care assistance services under CCDF? (658E(c)(2)(A), §98.30(a))

Check all agencies and strategies that will be used in your State/Territory.

- ☒ CCDF Lead Agency
- ☒ TANF offices
- ☐ Other government offices
- ☒ Child care resource and referral agencies
- ☐ Contractors
- ☒ Community-based organizations

- ☐ Public schools
- ☒ Internet (provide website): www.childcareinfo.ms
- ☒ Promotional materials
- ☒ Community outreach meetings, workshops or other in-person meetings
- ☐ Radio and/or television
- ☒ Print media
- ☐ Other. Describe: _____

2.2.2. How can parents apply for CCDF services?

Check all application methods that your State/Territory has chosen to implement.

- ☐ In person interview or orientation
- ☒ By mail
- ☒ By Phone/Fax
- ☒ Through the Internet (provide website) www.childcareinfo.ms
- ☒ By Email
- ☐ Through a State/Territory Agency
- ☒ Through an organization contracted by the State/Territory
- ☐ Other. Describe: _____

2.2.3. Describe how the Lead Agency provides consumer education to parents applying for CCDF assistance to promote informed choices about the quality of care provided by various providers in their communities.

Lead Agencies must certify that the State/Territory will collect and disseminate to parents of eligible children and the general public, consumer education information that will promote informed child care choices(658E (c)(2)(G), §98.33).

For example, memorandums of understanding with resource and referral agencies to provide consumer education to families applying for CCDF assistance, providing parents with provider lists showing licensing history and/or Quality Rating and Improvement System (QRIS) ratings, or informational brochures that address importance of quality and different care options available.

[The Lead Agency provides informational brochures that demonstrate high quality child care. In addition, the Lead Agency funds the MSCCR&R which provides parent education and referral services for selecting child care options. The Lead Agency provides parents a way to search for providers on their website. This information display's a provider's quality rating.](#)

2.2.4. Describe how the Lead Agency will support child care programs to increase the likelihood that CCDF-served children receive higher quality care as defined in your State/Territory.

For example, methods used to promote upward movement in quality rating and improvement system, methods used to encourage high quality programs to participate in the subsidy program such as tiered reimbursement, or incentives used

to support high quality programs in rural, suburban, urban, and low-income communities.

The Lead Agency works to increase the likelihood that children receiving child care subsidies have access to higher quality care by providing quality bonuses for every child receiving subsidy to child care providers participating in the Mississippi Child Care Quality Step System (QRIS). The QRIS is a five star system providing 7% (two star), 17% (three star), 22% (four star) and 25% (five star) increases in total monthly subsidies. In an effort to support the provider's success in the QRIS, the Lead Agency conducts an annual Child Care Facility Needs Assessment and responds with resources, identified by providers and designed to increase star ratings. In addition, the Lead Agency funds professional development and training and technical assistance programs at no cost to participants.

2.2.5. Describe how the Lead Agency promotes access to the CCDF subsidy program? Check the strategies implemented by your State/Territory.

- ☒ Provide access to program office/workers such as:
 - ☐ Providing extended office hours
 - ☐ Accepting applications at multiple office locations
 - ☒ Providing a toll-free number for clients
 - ☐ Email/online communication
 - ☐ Other. Describe: _____
- ☒ Using a simplified eligibility determination process such as:
 - ☒ Simplifying the application form (such as eliminating unnecessary questions, lowering the reading level)
 - ☒ Developing a single application for multiple programs
 - ☒ Developing web-based and/or phone-based application procedures
 - ☐ Coordinating eligibility policies across programs. List the program names _____
 - ☐ Streamlining verification procedures, such as linking to other program data systems
 - ☒ Providing information multi-lingually
 - ☒ Including temporary periods of unemployment in eligibility criteria (job search, seasonal unemployment). Length of time **60 days**. (Note: this period of unemployment should be included in the Lead Agency's definition of working, or job training/educational program at 2.3.3).
 - ☐ Other. Describe: _____
- ☐ Other. Describe: _____
- ☐ None

2.2.6. Describe the Lead Agency's policies to promote continuity of care for children and stability for families.

Check the strategies, if any, that your State/Territory has chosen to implement.

- ☒ Provide CCDF assistance during periods of job search. Length of time **60 days**

- ☐ Establish two-tiered income eligibility to allow families to continue to receive child care subsidies if they experience an increase in income but still remain below 85% of State median income (SMI)
- ☐ Synchronize review date across programs. List programs: _____
- ☒ Longer eligibility re-determination periods (e.g., 1 year). Describe [Eligibility periods are one year in length for working parents.](#)
- ☐ Extend periods of eligibility for families who are also enrolled in either Early Head Start or Head Start and pre-k programs. Describe _____
- ☐ Extend periods of eligibility for school-age children under age 13 to cover the school year. Describe _____
- ☐ Minimize reporting requirements for changes in family's circumstances that do not impact families' eligibility, such as changes in income below a certain threshold or change in employment
- ☐ Individualized case management to help families find and keep stable child care arrangements. Describe _____
- ☐ Using non-CCDF Funds to continue subsidy for families who no longer meet eligibility, such as for children who turn 13 years of age during the middle of a program year
- ☐ Other. Describe _____
- ☐ None

2.2.7. How will the Lead Agency provide outreach and services to eligible families with limited English proficiency?

Check the strategies, if any, that your State/Territory has chosen to implement.

- ☐ Application in other languages (application document, brochures, provider notices)
- ☐ Informational materials in non-English languages
- ☐ Training and technical assistance in non-English languages
- ☐ Website in non-English languages
- ☐ Lead Agency accepts applications at local community-based locations
- ☐ Bilingual caseworkers or translators available
- ☐ Outreach Worker
- ☒ Other:

[The Lead Agency has requested translation assistance from an internal agency division for applications. This process is not complete at this time. Additionally, the Lead Agency has developed brochures for non-English and low-literacy individuals to assist them with identifying quality child care environments. These can be viewed at:](#)

http://www.mdhs.state.ms.us/pdfs/eccd_0to2yrs_brochure.pdf

http://www.mdhs.state.ms.us/pdfs/eccd_3to5yrs_brochure.pdf

[Educational materials regarding the QRIS are printed in Spanish. Training materials for MS eChildcare are available in Spanish and Vietnamese. Lead Agency staff contains Spanish speakers that can assist on calls to the office when needed.](#)

☐ None

If the Lead Agency checked any option above related to providing information or services in other non-English languages, please list the languages offered _____

2.2.8. How will the Lead Agency overcome language barriers with providers?

Check the strategies, if any, that your State/Territory has chosen to implement.

- ☒ Informational materials in non-English languages
- ☐ Training and technical assistance in non-English languages
- ☐ CCDF health and safety requirements in non-English languages
- ☒ Provider contracts or agreements in non-English languages
- ☒ Website in non-English languages
- ☐ Bilingual caseworkers or translators available
- ☐ Collect information to evaluate on-going need, recruit, or train a culturally or linguistically diverse workforce
- ☐ Other: _____
- ☐ None

If the Lead Agency checked any option above related to providing information or services in other non-English languages, please list the languages offered

The Lead Agency has some information available in Vietnamese and Spanish. Addition materials such as Provider Agreements and website information are currently being translated into Spanish.

2.2.9. Describe how the Lead Agency documents and verifies applicant information using the table below. (§98.20(a))

Check the strategies that will be implemented by your State/Territory. **Attach** a copy of your parent application for the child care subsidy program(s) as

Attachment 2.2.9 or provide a web address, if available _____

http://www.mdhs.state.ms.us/pdfs/eccd_A_ElectronicApplicationForm.pdf,
http://www.mdhs.state.ms.us/pdfs/eccd_B_ElectronicParentSOAForm.pdf,
http://www.mdhs.state.ms.us/pdfs/eccd_C_EligibilityChecklist.pdf,
http://www.mdhs.state.ms.us/pdfs/eccd_D_ElectronicGuardianshipForm.pdf,
http://www.mdhs.state.ms.us/pdfs/eccd_E_ElectronicChildSupportVerificationForm.pdf,
http://www.mdhs.state.ms.us/pdfs/eccd_parentsrights.pdf

Reminder – Lead Agencies are reminded that, for purposes of implementing the citizenship verification requirements mandated by title IV of Personal Responsibility and Work Opportunity Reconciliation Act, only the citizenship and immigration status of the child, who is the primary beneficiary of the child care benefit, is relevant for eligibility purposes. (ACYF-PI-CC-98-08) States may not deny child care benefits to an eligible child because the parent(s), legal guardians, persons standing *in loco*

parentis, or other household members have not provided information regarding their immigration status.

| The Lead Agency requires documentation of: | Describe how the Lead Agency documents and verifies applicant information: |
|---|--|
| <input checked="" type="checkbox"/> Applicant identity | Current driver's license or state issued ID, birth certificate |
| <input type="checkbox"/> Household composition | |
| <input checked="" type="checkbox"/> Applicant's relationship to the child | Birth certificate, open child support case |
| <input checked="" type="checkbox"/> Child's information for determining eligibility (e.g., identity, age, etc.) | Birth certificate |
| <input checked="" type="checkbox"/> Work, Job Training or Educational Program | Employment: check stubs, or letter from employer if newly hired or paid in cash Education: verification of full-time enrollment from educational institution. |
| <input checked="" type="checkbox"/> Income | Pay check stubs, and verification of receipt of other income such as child support. |
| <input checked="" type="checkbox"/> Other. Describe Verification of cooperation with Child Support. | Verification from the MDHS, Division of Child Support Enforcement that client is cooperating. |

2.2.10. Which strategies, if any, will the Lead Agency use to assure the timeliness of eligibility determinations upon receipt of applications?

- ☐ Time limit for making eligibility determinations. Describe length of time _____
- ☒ Track and monitor the eligibility determination process
- ☐ Other. Describe _____
- ☐ None

2.2.11. Are the policies, strategies or processes provided in questions 2.2.1. through 2.2.10 different for families receiving TANF? (658E(c)(2)(H) & (3)(D), §§98.16(g)(4), 98.33(b), 98.50(e))

- ☐ Yes. If yes, describe: _____
- ☒ No.

2.2.12. Informing parents who receive TANF benefits about the exception to the individual penalties associated with the TANF work requirement

The regulations at §98.33(b) require the Lead Agency to inform parents who receive TANF benefits about the exception to the individual penalties associated with the work requirement for any single custodial parent who has a demonstrated inability to obtain needed child care for a child under 6 years of age. Lead Agencies must coordinate with TANF programs to ensure, pursuant that TANF families with young children will be informed of their right not to be sanctioned if they meet the criteria set forth by the State TANF agency in accordance with section 407(e)(2) of the Social Security Act.

In fulfilling this requirement, the following criteria or definitions are applied by the TANF agency to determine whether the parent has a demonstrated inability to obtain needed child care. **NOTE:** The TANF agency, not the CCDF Lead Agency, is responsible for establishing the following criteria or definitions. These criteria or definitions are offered in this Plan as a matter of public record.

a) Identify the TANF agency that established these criteria or definitions:
State/Territory TANF Agency
Mississippi Department of Human Services, Division of Field Operations.

b) Provide the following definitions established by the TANF agency.
"appropriate child care":

Appropriate child care is defined as a licensed child care center or a family day care (home or an individual) chosen by the parent/caretaker relative to care for the child. The child care provider must be 18 years old or older.

"reasonable distance":

Appropriate child care must be within a reasonable distance (within a 20-mile radius) of the parent/caretaker relative's home or worksite.

"unsuitability of informal child care":

Unavailable or unsuitable child care shall be defined as a situation involving child abuse, neglect or an unsafe environment. If the parent/caretaker relative refuses to take the child to a particular day care center, he/she must inform the case manager of the reason for the refusal. The case manager must investigate to verify and substantiate the parent's claim of unsuitable child care. Complaints involving child abuse, neglect or an unsafe environment will be reported to the MS State Health Department, Division of Child Care Facilities Licensure. The case manager must contact the Office of Children and Youth's Designated Agent (now the Division of Early Childhood Care and Development) to discuss the problem and determine what other child care services are available in the area. The case manager will determine good cause for non-participation based on the investigation and information gathered.

"affordable child care arrangements":

Affordable formal child care is child care that is equal to or less than the established rates for the type of care according to the OCY Child Care Policy Manual (now Mississippi Child Care Payment Program Policy Manual).

c) How are parents who receive TANF benefits informed about the exception to individual penalties associated with the TANF work requirements?

- ☒ In writing
☐ Verbally
☐ Other: _____

2.3. Eligibility Criteria for Child Care

In order to be eligible for services, children must (1) be under the age of 13, or under the age of 19 if the child is physically or mentally disabled or under court supervision; (2) reside with a family whose income is less than 85 percent of the State's median income for a family of the same size; and (3) reside with a parent or parents who is working or attending job training or an educational program; or (4) be receiving or needs to receive protective services. (658P(3), §98.20(a))

2.3.1. How does the Lead Agency define the following eligibility terms?

- *residing with* - living with, including taking meals and sleeping in the same house.
- *in loco parentis* – in place of parent, for example, a guardian or a relative or friend with whom the child resides if the child's parent is unable to act as the parent or has delegated his or her authority to someone else. The term describes someone who provides care and supervision like a parent but without going through the formalities of legal adoption or guardianship.

2.3.2. Eligibility Criteria Based Upon Age

a) The Lead Agency serves children from six weeks to 12 years 11 mo. (may not equal or exceed age 13).

b) Does the Lead Agency allow CCDF-funded child care for children age 13 and above but below age 19 years who are physically and/or mentally incapable of self-care? (658E(c)(3)(B), 658P(3), §98.20(a)(1)(ii))

☒ Yes, and the upper age is 18 years, 11 mo. (may not equal or exceed age 19).
 Provide the Lead Agency definition of *physical or mental incapacity* – a child under age 19 who meets the SSI definition of disability by having medically proven physical or mental condition(s) that cause marked and severe functional limitations expected to last at least 12 months in duration.

☐ No.

c) Does the Lead Agency allow CCDF-funded child care for children age 13 and above but below age 19 years who are under court supervision? (658P(3), 658E(c)(3)(B), §98.20(a)(1)(ii))

☐ Yes, and the upper age is _____ (may not equal or exceed age 19)
☒ No.

2.3.3. Eligibility Criteria Based Upon Work, Job Training or Educational Program

a) How does the Lead Agency define “working” for the purposes of eligibility? Provide a narrative description below, including allowable activities and if a minimum number of hours is required.

Reminder – Lead Agencies have the flexibility to include any work-related activities in its definition of working including periods of job search and travel time. (§§98.16(f)(3), 98.20(b))

working – Performing duties to earn a wage (for a minimum of 25 hours per week) or complete educational/job training such as practicums or internships (must be enrolled full time). Out of work parents, or parents who lose their job are allowed 60 days of job search time during which they are eligible for services.

b) Does the Lead Agency provide CCDF child care assistance to parents who are attending job training or an educational program? (§§98.16(g)(5), 98.20(b))

☒ Yes. If yes, how does the Lead Agency define “attending job training or educational program” for the purposes of eligibility? Provide a narrative description below.

Reminder – Lead Agencies have the flexibility to include any training or education-related activities in its definition of job training or education, including study time and travel time.

attending job training or educational program – Full time enrollment of any applicant in an education and/or training program resulting in any degree, diploma, or certificate designed to promote job skills and employability. Full time status is determined by the educational institution.

☐ No.

2.3.4. Eligibility Criteria Based Upon Receiving or Needing to Receive Protective Services

a) Does the Lead Agency provide child care to children in protective services? (§§98.16(f)(7), 98.20(a)(3)(ii)(A) & (B))

☒ Yes. If yes, how does the Lead Agency define “protective services” for the purposes of eligibility? Provide a narrative description below.

Reminder – Lead Agencies have the flexibility to define protective services beyond formal child welfare or foster care cases. Lead Agencies may elect to include homeless children and

other vulnerable populations in the definition of protective services.

Note – If the Lead Agency elects to provide CCDF-funded child care to children in foster care whose foster care parents are not working, or who are not in education/training activities for CCDF purposes these children are considered to be in protective services and should be included in this definition.

- *protective services* – Services provided to families in which abuse or neglect or children has occurred and a finding of substantiated abuse or neglect has been determined. The purpose of service provision is to protect children within the context of the family from further abuse or neglect.

☐ No.

b) Does the Lead Agency waive, on a case-by-case basis, the co-payment and income eligibility requirements for cases in which children receive, or need to receive, protective services? (658E(c)(3)(B), 658P(3)(C)(ii), §98.20(a)(3)(ii)(A))

☒ Yes.
☐ No.

2.3.5. Income Eligibility Criteria

a) How does the Lead Agency define “income” for the purposes of eligibility? Provide the Lead Agency’s definition of “income” for purposes of eligibility determination. (§§98.16(g)(5), 98.20(b))

income – funds received by all applicable individuals as described in policy which are not supplemented by any public assistance other than food stamps or medical assistance, and does not exceed 85 percent of the State Median Income (SMI).

b) Which of the following sources of income, if any, will the Lead Agency exclude or deduct from calculations of total family income for the purposes of eligibility determination? Check any income the Lead Agency chooses to exclude or deduct, if any.

- ☒ Adoption subsidies
- ☒ Foster care payments
- ☐ Alimony received or paid
- ☐ Child support received
- ☐ Child support paid
- ☒ Federal nutrition programs
- ☒ Federal tax credits
- ☒ State/Territory tax credits

- ☒ Housing allotments, Low-Income Energy Assistance Program (LIHEAP) or energy assistance
- ☐ Medical expenses or health insurance related expenses
- ☒ Military housing or other allotment/bonuses
- ☒ Scholarships, education loans, grants, income from work study
- ☐ Social Security Income
- ☐ Supplemental Security Income (SSI)
- ☐ Veteran's benefits
- ☒ Unemployment Insurance
- ☐ Temporary Assistance for Needy Families (TANF)
- ☐ Worker Compensation
- ☐ Other types of income not listed above _____
- ☐ None

c) Whose income will be excluded, if any, for purposes of eligibility determination? Check anyone the Lead Agency chooses to exclude, if any.

- ☐ Children under age 18
- ☐ Children age 18 and over – still attending school
- ☒ Teen parents
- ☐ Unrelated members of household
- ☒ All members of household except for parents/legal guardians
- ☒ Other Any parent/guardian who is over the age of 65.
- ☐ None

d) Provide the CCDF income eligibility limits in the table below. **Complete** columns (a) and (b) based upon maximum eligibility initial entry into the CCDF program. Complete Columns (c) and (d) **ONLY IF** the Lead Agency is using income eligibility limits lower than 85% of the SMI.

| Family Size | (a) 100% of State Median Income (SMI) (\$/month) | (b) 85% of State Median Income (SMI) (\$/month) [Multiply (a) by 0.85] | IF APPLICABLE Income Level if lower than 85% SMI | |
|-------------|---|--|---|---|
| | | | (c) \$/month | (d) % of SMI [Divide (c) by (a), multiply by 100] |
| 1 | | 0 | | |
| 2 | 3745 | 2333 | | |
| 3 | 3431 | 2916 | | |
| 4 | 4020 | 3417 | | |
| 5 | 4706 | 4000 | | |

Reminder - Income limits must be provided in terms of State Median Income (SMI) (or Territory Median Income) even if federal poverty level is used in implementing the program. (§98.20(a)(2)). [FY 2013 poverty guidelines](#) are available at hhs.gov.

e) Will the Lead Agency have “tiered eligibility” (i.e., a separate income limit at re-determination to remain eligible for the CCDF program)?

☐ Yes. If yes, **provide** the requested information from the table in 2.3.5d and **describe** _____.

Note: This information can be included in a separate table, or by placing a “/” between the entry and exit levels in the above table.

☒ No.

f) SMI Year **2004** and SMI Source **U. S. Census Bureau**

g) These eligibility limits in column (c) became or will become effective on: **October 2004**

2.3.6. Eligibility Re-determination

a) Does the State/Territory follow OCC’s 12 month re-determination recommendation? (See [Program Instruction on Continuity of Care.](#))

☒ Yes

☐ No. If no, what is the re-determination period in place for most families?

☐ 6 months

☐ 24 months

☐ Other. Describe _____

☐ Length of eligibility varies by county or other jurisdiction. Describe _____

b) **Does the Lead Agency coordinate or align re-determination periods with other programs?**

☐ Yes. If yes, **check programs that the Lead Agency aligns eligibility periods with and describe the redetermination period for each.**

☐ Head Start and/or Early Head Start Programs. Re-determination period _____

☐ Pre-kindergarten programs. Re-determination period _____

☐ TANF. Re-determination period _____

☐ SNAP. Re-determination period _____

☐ Medicaid. Re-determination period _____

☐ SCHIP. Re-determination period _____

☐ Other. Describe _____

☒ No.

- c) Describe under what circumstances, if any, a family's eligibility would be reviewed prior to redetermination. For example, regularly scheduled interim assessments, or a requirement for families to report changes.

Parents who are eligible because they are enrolled full time in an educational program must be redetermined eligible each semester/quarter. Clients who were referred from TANF, DFCS, and the home visiting program (HHM) are subject to eligibility based on the policies of the referring program.

- d) Describe any action(s) the State/Territory would take in response to any change in a family's eligibility circumstances prior to re-determination

Parents and other clients as described in the previous response would be terminated. A two-week notice of termination is provided when children are enrolled in licensed child care programs.

- e) Describe how these policies are implemented in a family-friendly manner that promotes access and continuity of care for children. (See [Information Memorandum on Continuity of Care](#) for examples).

The Lead Agency has adopted the following family-friendly policies to support continuity of care:

- 12 month eligibility period
- Any out of work parent has 60 days to engage in job search activities before losing eligibility. During that time, parent co-payments are reduced to the lowest allowable amount.
- Income is averaged over the last two check stubs to obtain an average income. Overtime pay and bonus payments are considered irregular income and are also averaged to obtain an accurate income.
- Children with court-ordered visitation are flagged in CCIS and remain eligible during visitation periods, even extended visitation periods.
- The Lead Agency pays licensed providers for 15 child absences during the program year.

- f) Does the Lead Agency use a simplified process at re-determination?

- ☒ Yes. If yes, describe During redetermination, parents are asked only to verify profile information and submit income/school enrollment verification.
- ☐ No.

2.3.7. Waiting Lists

Describe the Lead Agency's waiting list status. Select **ONE** of these options.

- ☐ Lead Agency currently does not have a waiting list and:
 - ☐ All eligible families *who apply* will be served under State/Territory eligibility rules
 - ☐ Not all eligible families *who apply* will be served under State/Territory eligibility rules
- ☒ Lead Agency has an active waiting list for:
 - ☒ Any eligible family who applies when they cannot be served at the time of application
 - ☐ Only certain eligible families. Describe those families: _____
- ☐ Waiting lists are a county/local decision. Describe _____
- ☐ Other. Describe _____

2.3.8. Appeal Process for Eligibility Determinations

Describe the process for families to appeal eligibility determinations

Families who wish to have their eligibility determination reviewed, must contact the Lead Agency. Upon receipt of request for review, the Lead Agency reviews family information and responds with a final determination.

2.4. Sliding Fee Scale and Family Contribution

The statute and regulations require Lead Agencies to establish a sliding fee scale that varies based on income and the size of the family to be used in determining each family's contribution (i.e., co-payment) to the cost of child care (658E(c)(3)(B) §98.42).

2.4.1. Attach a copy of the sliding fee scale as Attachment 2.4.1.

Will the attached sliding fee scale be used in all parts of the State/Territory?

- ☒ Yes. Effective Date **October 2004**
- ☐ No. If no, attach other sliding fee scales and their effective date(s) as **Attachment 2.4.1a, 2.4.1b**, etc.

2.4.2. What income source and year will be used in creating the sliding fee scale? (658E(c)(3)(B))

Check only one option.

- ☒ State Median Income, Year: **2004**
- ☐ Federal Poverty Level, Year: _____
- ☐ Income source and year varies by geographic region. Describe income source and year: _____
- ☐ Other. Describe income source and year: _____

2.4.3. How will the family's contribution be calculated and to whom will it be applied?

Check all that the Lead Agency has chosen to use. (§98.42(b))

- ☐ Fee is a dollar amount and
 - ☐ Fee is per child with the same fee for each child
 - ☐ Fee is per child and discounted fee for two or more children
 - ☐ Fee is per child up to a maximum per family
 - ☐ No additional fee charged after certain number of children
 - ☐ Fee is per family
- ☒ Fee is a percent of income and
 - ☐ Fee is per child with the same percentage applied for each child
 - ☐ Fee is per child and discounted percentage applied for two or more children
 - ☐ No additional percentage applied charged after certain number of children
 - ☒ Fee is per family
- ☐ Contribution schedule varies by geographic area. Describe: _____
- ☐ Other. Describe _____

If the Lead Agency checked more than one of the options above, describe _____

2.4.4. Will the Lead Agency use other factors in addition to income and family size to determine each family's contribution to the cost of child care? (658E(c)(3)(B), §98.42(b))

- ☒ Yes, and describe those additional factors: [Clients who are referred for service by TANF, DFCS, and HHM receive a zero \(TANF\) or reduced co-payment amount \(DFCS & HHM\).](#)
- ☐ No.

2.4.5. The Lead Agency may waive contributions from families whose incomes are at or below the poverty level for a family of the same size. (§98.42(c)).

Select **ONE** of these options.

Reminder – Lead Agencies are reminded that the co-payments may be waived for only two circumstances - for families at or below the poverty level or on a case-by-case basis for children falling under the definition of “protective services” (as defined in 2.3.4.a).

- ☐ ALL families, including those with incomes at or below the poverty level for families of the same size, ARE required to pay a fee.
- ☐ NO families with income at or below the poverty level for a family of the same size ARE required to pay a fee. The poverty level used by the Lead Agency for a family of 3 is: \$_____

- ☒ SOME families with income at or below the poverty level for a family of the same size ARE NOT required to pay a fee. The Lead Agency waives the fee for the following families: Clients participating in an approved TANF activity.

2.5. Prioritizing Services for Eligible Children and Families

At a minimum, CCDF requires Lead Agencies to give priority for child care assistance to children with special needs, or in families with very low incomes. Prioritization of CCDF assistance services is not limited to eligibility determination (i.e., establishment of a waiting list or ranking of eligible families in priority order to be served). Lead Agencies may fulfill priority requirements in other ways such as higher payment rates for providers caring for children with special needs or waiving co-payments for families with very low incomes (at or below the federal poverty level). (658E(c)(3)(B), §98.44)

2.5.1. How will the Lead Agency prioritize child care services to children with special needs or in families with very low incomes? (658E(c)(3)(B), §98.44)

Lead Agencies have the discretion to define *children with special needs* and *children in families with very low incomes*. Lead Agencies are not limited in defining *children with special needs* to only those children with physical or mental disabilities (e.g., with a formal Individual Education Plan (IEP) required under the Individuals with Disabilities Education Act (IDEA)). Lead Agencies could consider children in the child welfare system, children of teen parents, or homeless children as examples of *children with special needs*.

| How will the Lead Agency prioritize CCDF services for: | Eligibility Priority (Check only one) | Is there a time limit on the eligibility priority or guarantee? | Other Priority Rules |
|---|---|--|--|
| Children with special needs Provide the Lead Agency definition of <i>Children with Special Needs</i> <u>Special Needs rates may be applied for children through the age of 18 who meet the SSI definition of disability by having medically proven physical or mental condition(s) that cause marked and severe functional limitations expected to last at least 12 months in duration and render the child(ren) incapable of self-care. The condition(s) must be documented by a physician. In the</u> | <input checked="" type="checkbox"/> Priority over other CCDF-eligible families <input type="checkbox"/> Same priority as other CCDF-eligible families <input type="checkbox"/> Guaranteed subsidy eligibility <input type="checkbox"/> Other. Describe _____ | <input type="checkbox"/> Yes. The time limit is: _____ <input checked="" type="checkbox"/> No | <input type="checkbox"/> Different eligibility thresholds. Describe _____ <input checked="" type="checkbox"/> Higher rates for providers caring for children with special needs requiring additional care <input type="checkbox"/> Prioritizes quality funds for providers serving these children <input type="checkbox"/> Other. |

| How will the Lead Agency prioritize CCDF services for: | Eligibility Priority (Check only one) | Is there a time limit on the eligibility priority or guarantee? | Other Priority Rules |
|---|---|--|---|
| absence of SSI benefits, medical documentation should attest to the degree of functional limitation(s) and prescribe the special care needed. | | | Describe _____ |
| Children in families with very low incomes Provide the Lead Agency definition of Children in Families with Very Low Incomes Income at or below the 50 percent of the State Median Income (SMI). | <input checked="" type="checkbox"/> Priority over other CCDF-eligible families <input type="checkbox"/> Same priority as other CCDF-eligible families <input type="checkbox"/> Guaranteed subsidy eligibility <input type="checkbox"/> Other. Describe _____ | <input type="checkbox"/> Yes. The time limit is: _____ <input checked="" type="checkbox"/> No | <input type="checkbox"/> Different eligibility thresholds. Describe _____ <input type="checkbox"/> Waiving co-payments for families with incomes at or below the Federal Poverty Level <input checked="" type="checkbox"/> Other. Describe None |

2.5.2. How will CCDF funds be used to provide child care assistance to meet the needs of families receiving Temporary Assistance for Needy Families (TANF), those attempting to transition off TANF through work activities, and those at risk of becoming dependent on TANF?

(658E(c)(2)(H), Section 418(b)(2) of the Social Security Act, §§98.50(e), 98.16(g)(4))

Reminder - CCDF requires that not less than 70 percent of CCDF Mandatory and Matching funds be used to provide child care assistance for families receiving Temporary Assistance for Needy Families (TANF), those attempting to transition off TANF through work activities, and those at risk of becoming dependent on TANF.

- ☒ Use priority rules to meet the needs of TANF families (describe in 2.5.1 or 2.5.3.)
- ☒ Waive fees (co-payments) for some or all TANF families who are below poverty level
- ☐ Coordinate with other entities (i.e. TANF office, other State/Territory agencies, and contractors)
- ☐ Other: _____

2.5.3. List and define any other eligibility conditions, priority rules and definitions that will be established by the Lead Agency. (658E(c)(3)(B), §98.16(g)(5), §98.20(b))

Reminder – Lead Agencies are reminded that any eligibility criteria and terms provided below must comply with the eligibility requirements of §98.20 and provided in section 2.2. Any priority rules provided must comply with the priority requirements of §98.44 and provided in section 2.4.1.

| Term(s) | Definition(s) |
|---------|---------------|
| | |
| | |
| | |

2.6. Parental Choice In Relation to Certificates, Grants or Contracts

The parent(s) of each eligible child who receives or is offered financial assistance for child care services has the option of either enrolling such child with a provider that has a grant or contract for the provision of service or receiving a child care certificate. (658E(c)(2)(A), §98.15(a)).

2.6.1. Child Care Certificates

a) When is the child care certificate (also referred to as voucher or authorization) issued to parents? (658E(c)(2)(A)(iii), 658P(2), §98.2, §98.30(c)(4) & (e)(1) & (2))

- ☐ Before parent has selected a provider
- ☒ After parent has selected a provider
- ☐ Other. Describe

All referred clients are supported in selecting an approved provider at the time of referral. This supports the Lead Agency in providing the fastest service possible for the state's most vulnerable populations. Non-referred clients who are determined eligible are mailed a certificate and asked to return it with provider information.

b) How does the Lead Agency inform parents that the child care certificate permits them to choose from a variety of child care categories, including child care centers, child care group homes, family child care homes, and in-home providers? (§98.30(e)(2))

- ☐ Certificate form provides information about choice of providers
- ☒ Certificate is not linked to a specific provider so parents can choose provider of choice
- ☒ Consumer education materials (flyers, forms, brochures)
- ☒ Referral to child care resource and referral agencies
- ☒ Verbal communication at the time of application
- ☐ Public Services Announcement
- ☒ Agency Website: www.childcareinfo.ms

- ☐ Community outreach meetings, workshops, other in person activities
- ☐ Multiple points of communication throughout the eligibility and renew process
- ☐ Other. Describe _____

c) What information is included on the child care certificate? **Attach a copy of the child care certificate as Attachment 2.6.1.** (658E(c)(2)(A)(iii))

- ☒ Authorized provider(s)
- ☒ Authorized payment rate(s)
- ☒ Authorized hours
- ☒ Co-payment amount
- ☒ Authorization period
- ☒ Other. Describe [Parent and child identifying information. See attachment.](#)

d) What is the estimated proportion of services that will be available for child care services through certificates?

[Approximately 75% of subsidy funds are dispersed through certificates. Remaining subsidy funds are dispersed through slots.](#)

2.6.2. Child Care Services Available through Grants or Contracts

a) In addition to offering certificates, does the Lead Agency provide child care services through grants or contracts for child care slots? (658A(b)(1), 658P(4), §§98.16(g)(1), 98.30(a)(1) & (b)). **Note:** Do not check “yes” if every provider is simply required to sign an agreement in order to be paid in the certificate program.

- ☒ Yes. If yes, **describe** the type(s) of child care services available through grants or contracts, the process for accessing grants or contracts, and the range of providers that will be available through grants or contracts: [The Lead Agency has non-competitive subgrants with various entities to provide child care slots to children and families. These subgrants are administered by the City of Jackson, City of Starkville, City of Vicksburg, Hancock County Human Resources Agency, Hinds Community College, \(Sanderson Farms, Inc., - Business Sponsored\), Midtown Partners and the United Way of the Capital Area.](#)
- ☐ No. If no, skip to 2.6.3.

b) Will the Lead Agency use grants or contracts for child care services to achieve any of the following? Check the strategies, if any, that your State/Territory chooses to implement.

- ☒ Increase the supply of specific types of care
- ☒ Programs to serve children with special needs

- ☐ Wrap-around or integrated child care in Head Start, Early Head Start, pre-k, summer or other programs
- ☒ Programs to serve infant/toddler
- ☒ School-age programs
- ☒ Center-based providers
- ☐ Family child care providers
- ☐ Group-home providers
- ☐ Programs that serve specific geographic areas
 - ☐ Urban
 - ☐ Rural
- ☐ Other. Describe _____
- ☒ Support programs in providing higher quality services
- ☒ Support programs in providing comprehensive services
- ☐ Serve underserved families. Specify: _____
- ☐ Other. Describe _____

c) Are child care services provided through grants or contracts offered throughout the State/Territory? (658E(a), §98.16(g)(3))

- ☒ Yes.
- ☐ No, and **identify** the localities (political subdivisions) and services that are not offered: _____

d) How are payment rates for child care services provided through grants/contracts determined?

All rates are based on rates published by the Lead Agency and are determined based on total budget allotment and cost of care.

e) What is the estimated proportion of direct services that will be available for child care services through grants/contracts?

Approximately 25% of subsidy funds are dispersed through grants/contracts.

2.6.3. How will the Lead Agency inform parents and providers of policies and procedures for affording parents unlimited access to their children whenever their children are in the care of a provider who receives CCDF funds? (658E(c)(2)(B), §98.31))

Check the strategies that will be implemented by your State/Territory.

- ☐ Signed declaration
- ☐ Parent Application
- ☐ Parent Orientation
- ☒ Provider Agreement
- ☐ Provider Orientation
- ☐ Other. Describe: _____

2.6.4. The Lead Agency must allow for in-home care (i.e., care provided in the child's own home) but may limit its use. (§§98.16(g)(2), 98.30(e)(1)(iv))

Will the Lead Agency limit the use of in-home care in any way?

☒ No

☐ Yes. If checked, what limits will the Lead Agency set on the use of in-home care? Check all limits the Lead Agency will establish.

☐ Restricted based on minimum number of children in the care of the provider to meet minimum wage law or Fair Labor Standards Act

☐ Restricted based on provider meeting a minimum age requirement

☐ Restricted based on hours of care (certain number of hours, non-traditional work hours)

☐ Restricted to care by relatives

☐ Restricted to care for children with special needs or medical condition

☐ Restricted to in-home providers that meet some basic health and safety requirements

☐ Other. Describe _____

2.6.5. Describe how the Lead Agency maintains a record of substantiated parental complaints about providers and makes substantiated parental complaints available to the public on request. (658E(c)(2)(C), §98.32)

The Lead Agency maintains records of provider complaints. Substantiated reports are available upon request to the Lead Agency.

2.7. Payment Rates for Child Care Services

The statute at 658E(c)(4) and the regulations at §98.43(b)(1) require the Lead Agency to establish adequate payment rates for child care services that ensure eligible children equal access to comparable care.

2.7.1 Attach a copy of your payment rates as Attachment 2.7.1.

Will the attached payment rates be used in all parts of the State/Territory?

☒ Yes. Effective Date: [October 2007](#)

☐ No. If no, attach other payment rates and their effective date(s) as **Attachment 2.7.1a, 2.7.1b**, etc.

2.7.2. Which strategies, if any, will the Lead Agency use to ensure the timeliness of payments?

☐ Policy on length of time for making payments. Describe length of time _____

☒ Track and monitor the payment process

☐ Other. Describe _____

☐ None

2.7.3. Market Rate Survey

Lead Agencies must complete a local Market Rate Survey (MRS) no earlier than two years prior to the effective date of the Plan (no earlier than October 1, 2011). The MRS must be completed prior to the submission of the CCDF Plan (see [Program Instruction CCDF-ACF-PI-2009-02](#) for more information on the MRS deadline).

- a) Provide the month and year when the local Market Rate Survey(s) was completed (§98.43(b)(2)): **March 2013**.
- b) Provide a **summary of the results** of the survey. The summary should include a description of the sample population, data source, the type of methodology used, response rate, description of analyses, and key findings.

The Mississippi State Department of Health (MSDH), Bureau of Licensure and Regulations, periodically provided a list of licensed child care facilities in Mississippi. The most recent populated list indicated 1,640 facilities. A list of family/in-home providers was developed using records from the Nurturing Homes Initiative (NHI) project and other MSU School of Human Sciences resources. A total of 419 family/in-home providers were identified. All 1,640 licensed centers and 419 family/in-home providers were selected for inclusion in the survey. Selected findings are provided below using frequencies, percentages, means and standard deviations. Where appropriate, comparisons are made between licensed centers and family/in-home providers.

CCDF Certificates

Overall, 3,739 licensed and family/in-home centers accept CCDF certificates. Of these 3,739 centers, 1,236 are licensed centers and 2,504 are family/in-home providers. Of the licensed centers, 747 (60.4%) are in Tier 1, 482 (39.0%) are in Tier 2, and seven (0.01%) are Tier 3. Of the family/in-home providers, 2,461 (98.2%) are in Tier 3, and 20 (0.01%) are in each Tiers 1 and 2.

Vacancies

The current MSDH licensed center list indicates there are 35,762 total vacancies of a total maximum capacity of 132,512. The NACCRRAware database shows there are 255 vacancies in family/in-home care facilities.

Weekly and Monthly Childcare Rates

Child care rates reported by licensed centers were generally higher than those reported by family/in-home providers. However, these differences were minimal across all categories of time and age. Rates reported for weekly part-time for children age five to 12 and monthly part-time for two-, three- and four-year-old children were the same for licensed centers and family/in-home providers. The 75th percentile by center type, time, and age are provided in Table 2.

2.7.4. Describe the payment rate ceilings in relation to the current MRS using the tables below.

Because of the flexibility that Lead Agencies have in setting payment rate ceilings, the following tables have been developed to simplify Lead Agency reporting on how their payment rate ceilings compare to their most recent MRS. These tables are not meant to collect comprehensive payment rate ceilings within a State/Territory and ACF recognizes that Lead Agencies are not required to set their payment rate ceilings at the 75th percentile. These tables allow Lead Agencies to use a common metric – the 75th percentile – as a reference point against which the Lead Agency can report their percentiles for three selected age groups in two geographic areas for licensed child care centers and licensed family child care homes.

In table 2.7.4a and 2.7.4b, *highest rate area* refers to the State or Territory's area or geographic region with the highest maximum payment rate ceiling for child care centers (2.7.4a) and the lowest maximum payment rate ceiling for child care centers (2.7.4b). Identify the highest rate area in the box provided. In column (a), provide the full-time monthly rate at the 75th percentile from the most recent MRS, even if the most recent MRS is not used to set rates. In column (b), provide the maximum monthly payment rate ceiling from your CCDF payment rate table. Complete column (c) ONLY IF the percentile for the monthly maximum payment rate ceiling is lower than the 75th percentile of the most recent MRS.

Note - Report the “base” maximum reimbursement rate ceiling, not including any rate add-ons or tiered reimbursements. For example, if maximum reimbursement rate ceilings are tiered based on level of quality (e.g., accreditation, or rating within a quality rating system such as gold, silver and bronze), report the rates for the lowest level in the tables below (e.g., bronze), **only** if there is no lower “base” rate paid for child care services by providers **not** participating in the quality rating system.

If your State/Territory has hourly, daily and/or weekly maximum payment rate ceiling, Lead Agencies can use the following assumptions to calculate monthly maximum payment rate ceiling for column (b) – 9 hours a day, 5 days per week, 4.33 weeks per month.

OCC recognizes that States and Territories use a wide variety of age ranges and categories in setting payment rate ceilings. In these charts, report rates for the following ages only – 11 months, 59 months, and 84 months of age – regardless of what that age category may be called in your State/Territory.

| 2.7.4a – Highest Rate Area (Centers) | (a) Monthly Payment Rate at the 75th percentile from the most recent MRS | (b) Monthly Maximum Payment Rate Ceiling | (c) Percentile if lower than 75th percentile of most recent survey |
|---|--|---|--|
| | | | |

| 2.7.4a – Highest Rate Area (Centers) | (a) Monthly Payment Rate at the 75th percentile from the most recent MRS | (b) Monthly Maximum Payment Rate Ceiling | (c) Percentile if lower than 75th percentile of most recent survey |
|--|--|---|--|
| Full-Time Licensed Center Infants (11 months) | \$563 | \$346 | 70% |
| Full-Time Licensed Center Preschool (59 months) | \$476 | \$313 | 66% |
| Full-Time Licensed Center School-Age (84 months) | \$433 | \$304 | 70% |

| 2.7.4b – Lowest Rate Area (Centers) | (a) Monthly Payment Rate at the 75th percentile of the most recent MRS | (b) Monthly Maximum Payment Rate Ceiling | (c) Percentile if lower than 75th percentile of most recent survey |
|--|--|---|--|
| Full-Time Licensed Center Infants (11 months) | \$368 | \$346 | 94% |
| Full-Time Licensed Center Preschool (59 months) | \$325 | \$313 | 96% |
| Full-Time Licensed Center School-Age (84 months) | \$217 | \$304 | 140% |

In table 2.7.4c and 2.7.4d, *highest rate area* refers to the State or Territory’s area or geographic region with the highest maximum payment rate ceiling for family child care homes (2.7.4c) and the lowest maximum payment rate ceiling for family child care homes (2.7.4d). Identify the lowest rate area in the box provided. In column (a), provide the full-time monthly rate at the 75th percentile from the most recent MRS, even if the most recent MRS is not used to set rates. In column (b), provide the maximum monthly payment rate ceiling from your CCDF payment rate table. Complete column (c) ONLY IF the percentile for the monthly maximum payment rate ceiling is lower than the 75th percentile of the most recent MRS.

Note - Report the “base” maximum reimbursement rate ceilings, not including any rate add-ons or tiered reimbursement. For example, if maximum reimbursement

rate ceilings are tiered based on level of quality (e.g., accreditation, or rating within a quality rating system such as gold, silver and bronze), report the rates for the lowest level in the tables below (e.g., bronze), **only** if there is no lower “base” rate paid for child care services by providers **not** participating in the quality rating system.

If your State/Territory has hourly, daily and/or weekly maximum payment rate ceiling, Lead Agencies can use the following assumptions to calculate monthly maximum payment rate ceiling for column (b) – 9 hours a day, 5 days per week, 4.33 weeks per month.

OCC recognizes that States and Territories use a wide variety of age ranges and categories in setting payment rate ceilings. In these charts, report rates for the following ages only – 11 months, 59 months, and 84 months of age – regardless of what that age category may be called in your State/Territory.

| 2.7.4c – Highest Rate Area (FCC) | (a) Monthly Payment Rate at the 75th percentile of the most recent MRS | (b) Monthly Maximum Payment Rate Ceiling | (c) Percentile if lower than 75th percentile of most recent survey |
|---|--|---|--|
| Full-Time Licensed FCC Infants (11 months) | \$476 | \$251 | 53% |
| Full-Time Licensed FCC Preschool (59 months) | \$325 | \$227 | 70% |
| Full-Time Licensed FCC School-Age (84 months) | \$368 | \$222 | 60% |

| 2.7.4d – Lowest Rate Area (FCC) | (a) Monthly Payment Rate at the 75th percentile of the most recent MRS | (b) Monthly Maximum Payment Rate Ceiling | (c) Percentile if lower than 75th percentile of most recent survey |
|---|--|---|--|
| Full-Time Licensed FCC Infants (11 months) | \$238 | \$251 | 105% |
| Full-Time Licensed FCC Preschool (59 months) | \$173 | \$227 | 131% |
| Full-Time Licensed FCC School-Age (84 months) | \$195 | \$222 | 114% |

2.7.5. How are payment rate ceilings for license-exempt providers set?

- Describe how license-exempt center payment rates are set: [The Lead Agency makes no distinction between license-exempt centers and those centers that are required to have a license.](#)

- b) Describe how license-exempt family child care home payment rates are set: [Payment rates for all providers are set based on availability of funding. Consideration is given to raising rates vs. fewer certificates.](#)
- c) Describe how license-exempt group family child care home payment rates are set: [Payment rates for all providers are set based on availability of funding. Consideration is given to raising rates vs. fewer certificates.](#)
- d) Describe how in-home care payment rates are set: [Payment rates for all providers are set based on availability of funding. Consideration is given to raising rates vs. fewer certificates.](#)

2.7.6 Will the Lead Agency provide any type of tiered reimbursement or differential rates on top of its base reimbursement rates for providing care for children receiving CCDF subsidies?

Check which types of tiered reimbursement, if any, the Lead Agency has chosen to implement. In the description of any tiered rates or add-ons, indicate the process and basis used for determining the tiered rates and amount and also indicate if the rates were set based on the MRS or another process.

- ☐ Differential rate for nontraditional hours. Describe _____
- ☒ Differential rate for children with special needs as defined by the State/Territory. Describe [Providers are paid higher rates for children with special needs, if a higher rate for care of these children is charged to non-CCDF clients.](#)
- ☐ Differential rate for infants and toddlers. Describe _____
- ☐ Differential rate for school-age programs. Describe _____
- ☐ Differential rate for higher quality as defined by the State/Territory. Describe _____
- ☐ Other differential rate. Describe _____
- ☐ None.

Reminder - CCDF regulations require the Lead Agency to certify that the payment rates for the provision of child care services are sufficient to ensure equal access for eligible families to child care services comparable to those provided to families not eligible to receive CCDF assistance. In the next three questions, Lead Agencies are asked to describe how their payment policies reflect the affordable copayments for families' provision of equal access (i.e., minimizing additional fees to parents), how payment practices are implemented consistent with the general child care market to be fair to providers (see [Information Memorandum on Continuity of Care](#) for examples), and the summary of facts describing how payment rates are adequate to ensure equal access to the full range of providers.

2.7.7. What policies does the Lead Agency have regarding any additional fees that providers may charge CCDF parents? The Lead Agency...

- ☒ Allows providers to charge the difference between the maximum reimbursement rate and their private pay rate

- ☐ Pays for provider fees (e.g., registration, meals, and supplies). Describe _____
- ☐ Policies vary across region, counties and or geographic areas. Describe _____
- ☐ Other. Describe _____

2.7.8 What specific policies and practices does the Lead Agency have regarding the following:

- a) Number of absent days allowed. Describe [The Lead Agency pays for 15 absence days per program year, per child. Absence days can be used for any reason deemed necessary by the family. The Lead Agency has no policy regarding the maximum number of allowable absences within a program year.](#)
- b) Paying based on enrollment. Describe [The Lead Agency pays for the care type \(full time vs part time\) that is assigned to the certificate, even if the child attends fewer hours than is required to determine care type on a given day. School-aged children and children attending Head Start programs are paid full time rates when full time care is needed during holidays, school breaks, and school closings.](#)
- c) Paying on the same schedule that providers charge private pay families (e.g., hourly, weekly, monthly). Describe [The Lead Agency pays all providers a daily rate, regardless of their established private pay schedule.](#)
- d) Using electronic tools (automated billing, direct deposit, EBT cards, etc.) to make provider payments. Describe [The Lead agency makes payments twice monthly to providers using a direct deposit system. Providers can elect to have their payments deposited to a pre-paid card instead of a traditional bank account.](#)

2.7.9. Describe how payment rates are adequate to ensure equal access to the full range of providers based on the Market Rate Survey.

CCDF regulations require the Lead Agency to certify that the payment rates for the provision of child care services are sufficient to ensure equal access for eligible families to child care services comparable to those provided to families not eligible to receive CCDF assistance. To demonstrate equal access, the Lead Agency shall provide at a minimum a summary of facts describing: (§98.43(a))

- a) How a choice of the full range of providers, e.g., child care centers, family child care homes, group child care homes and in-home care, is made available (§98.43(a)(1))

[The Lead Agency approves a range of care environments including licensed/unlicensed and home/center-based. The approval of the range of care environments allows for parental choice. Parents are provided with a list](#)

of providers participating in the subsidy program in a given area upon request.

b) How payment rates are adequate based on the most recent local MRS (§98.43(a)(2))

Based on the Mississippi Child Care Market Rate Survey, which supplies information about tuition rates at licensed child care facilities in the state, MDHS DECCD adjusts payment of tier rates accordingly. The Lead Agency makes every effort to balance reimbursement rates with the number of applicants for assistance. Tier rates are evaluated every two years as a result of the Mississippi Child Care Market Rate Survey. In addition, the Mississippi Child Care Quality Step System (MCCQSS) facilitates an increase in the provider's current tier rate based upon steps attained in the MCCQSS. The increase in the tiered reimbursement is referred to as an "On-Going Quality Bonus" and the increase in tiered reimbursement does not have to be passed on to the general public.

c) How family co-payments based on a sliding fee scale are affordable (§98.43(a)(3))

Co-payments for families whose income is at or below 50% of the SMI does not exceed 6.5% of the total family income per child. Co-payments for families whose income is between 50 and below 85% of the SMI does not exceed 8% of the total family income per child.

d) Any additional facts the Lead Agency considered to determine that its payment rates ensure equal access, including how the quality of child care providers is taken into account when setting rates and whether any other methodologies (e.g., cost estimation models) are used in setting payment rates

No additional facts.

2.8 Goals for the next Biennium

In this section, Lead Agencies are asked to identify at least one goal for the upcoming biennium and are encouraged to identify no more than five priority goals total. ACF will target technical assistance efforts to help Lead Agencies achieve their goal(s). Lead Agencies may include existing goals (e.g., already identified in a State strategic plan or established by the Governor for a Lead Agency). Lead Agencies will report progress and updates on these goals in the annual Quality Performance Report (Appendix 1), including any barriers encountered.

What are the Lead Agency's goals for the administration of the CCDF subsidy program in the coming Biennium? For example, what progress does the State/Territory expect to make on continuing improved services to parents and providers, continuity of care for children, improving outreach to parents and

providers, building or expanding information technology systems, or revising rate setting policies or practices).

Note – When identifying your goals below, Lead Agencies are encouraged to begin with an action verb reflecting the desired result over the two year period (e.g., Increase, Improve, Build, Align, Implement, Review, Revise, Streamline, Expand, etc.)

| |
|---|
| Goal 1 – Review provider reimbursement rates and co-payments to determine if changes are possible that allow the Lead Agency to increase certificate distribution. |
| Goal 2 – Build a website that will provide information to parents regarding services and provider selection, including those needing information in languages other than English. |
| Goal 3 – Expand the automation of administrative processes to streamline workflow processes and allow for additional focus on customer service. |
| Goal 4 – Build an online application for service that aligns with other agency services to reduce the burden on applicants. |
| Goal 5 – Increase reports from CCIS to ensure subsidies are reaching clients as quickly and accurately as possible. |

PART 3

HEALTH AND SAFETY AND QUALITY IMPROVEMENT ACTIVITIES

In this section, Lead Agencies are asked to describe their goals and plans for implementation of child care quality improvement activities. Under the Child Care and Development Block Grant Act, Lead Agencies have significant responsibility for ensuring the health and safety of children in child care through the State/Territory's child care licensing system and establishing health and safety standards for children who receive CCDF funds. Health and safety is the foundation of quality, but is not adequate to ensure that programs and staff are competent in supporting all areas of child development and promoting school success.

Quality investments and support systems to promote continuous quality improvement of both programs and the staff who work in them are a core element of CCDF. Lead Agencies have been reporting on their efforts to support program quality improvement and professional development since their initial Plans in 1999. This section allows Lead Agencies to continue to describe the steps that they are taking toward continuous quality improvement with a goal of having high quality child care options across settings for all families. While one of the key goals for CCDF is helping more low-income children access higher quality care, the Lead Agency has the flexibility to consider its goals and strategic plans for a child care quality improvement system for all families, not just those receiving assistance under CCDF.

Part 3 is organized around a template of four key components of quality which encompass most of the quality investments and initiatives undertaken by Lead Agencies over the past decade:

1. Ensuring health and safety of children through **licensing and health and safety standards**
2. Establishing **early learning guidelines**
3. Creating pathways to excellence for child care programs through **program quality improvement activities**
4. Creating pathways to an effective, well-supported child care workforce through **professional development systems and workforce initiatives**.

For each component, Lead Agencies are asked to conduct a three-step process. First, in this section, Lead Agencies will conduct a self-assessment of their programs by responding to the questions in Part 3 that describe the current status of their efforts, using common practices and best practices to list characteristics that build off those that have been reported in previous plans. Second, Lead Agencies then are asked to identify goals for making progress during the FY 2014-2015 biennium and describe their data, performance measure and evaluation capacity for each component. Third, Lead Agencies will report progress on their goals using the Quality Performance Report which is included and described in Appendix 1. The QPR will not be submitted until December 31, 2014.

Based on information reported in past plans, it is expected that the Lead Agency will describe in these first two steps how they will continue to make systematic investments towards child care quality improvement across its early childhood and school-age spectrum – including all settings, geographic coverage and age range – that will help show progress toward these outcomes and goals. Ultimately, these child care quality improvement elements should be fully implemented and integrated. Each State/Territory is expected to fall on a continuum of progress as a result of these first two steps. Lead Agency’s individual progress will be reported using the Quality Performance Report.

3.1. Activities to Ensure the Health and Safety of Children in Child Care (Component #1)

This section is intended to collect information on how Lead Agencies meet the statutory and regulatory provisions related to licensing and health and safety requirements. The CCDBG statute and the CCDF regulations address health and safety primarily in two ways.

First, Lead Agencies shall certify that they have in effect licensing requirements applicable to child care services provided within the area served by the Lead Agency (§98.40(a)(1)). These licensing requirements need not be applied to specific types of providers of child care services (658(E)(c)(2)(E)(i). Lead Agencies must describe those licensing requirements and how they are effectively enforced. Questions related to licensing requirements are in sections 3.1.1 and 3.1.2. Second, Each Lead Agency shall certify that there are in effect, within the State or local law, requirements designed to protect the health and safety of children that are applicable to child care providers of services for which assistance is provided under CCDF. Questions related to CCDF Health and Safety requirements are in sections 3.1.3 and 3.1.4.

3.1.1. Compliance with Applicable State/Territory and Local Regulatory Requirements on Licensing

Lead Agencies shall certify that they have in effect licensing requirements applicable to child care services provided within the area served by the Lead Agency (§98.40(a)(1)). These licensing requirements need not be applied to specific types of providers of child care services (658(E)(c)(2)(E)(i). Lead Agencies must describe those licensing requirements and how they are effectively enforced.

Definition: Licensing requirements are defined as regulatory requirements, including registration or certification requirements established under State, local, or tribal law, necessary for a provider to legally operate and provide child care services in a State or locality (§98.2). This does not include registration or certification requirements solely for child care providers to be eligible to participate in the CCDF program. Those requirements will be addressed in 3.1.2.

The relationship between licensing requirements and health and safety requirements varies by State/Territory depending on how comprehensive the licensing system is. In some States and Territories, licensing may apply to the majority of CCDF-eligible providers and the licensing standards cover the three CCDF health and safety requirements so the State/Territory has few, if any, providers for whom they need to establish additional CCDF health and safety requirements. In other cases, States and Territories have elected to exempt large numbers of providers from licensing which means that those exempted providers who care for children receiving assistance from CCDF will have to meet to the CCDF health and safety requirements through an alternative process outside of licensing as defined by the State/Territory. The State/Territory may also elect to impose more stringent standards and licensing or regulatory requirements on child care providers of services for which assistance is provided under the CCDF than the standards or requirements imposed on other child care providers. (§98.40(b)(1)) (658E(c)(2)(F), §98.41).

a) Is the Lead Agency responsible for child care licensing? (§98.11(a))

☐ Yes.

☒ No. Please identify the State or local (if applicable) entity/agency responsible for licensing [The Mississippi Department of Health, Division of Child Care Licensure](#)

b) Provide a brief overview of the relationship between the licensing requirements and CCDF health and safety requirements in your State/Territory.

[Licensed Centers participating in the CCDF program must remain in compliance at all times with the Mississippi State Department of Health's "Regulations Governing Licensure of Child Care Facilities." Unlicensed child care providers are required to sign a statement of agreement to comply with policy conditions related to: Basic Health, Safety, and Nutrition Assurances for Unlicensed Child Care Providers.](#)

c) Do the State/Territory's licensing requirements serve as the CCDF health and safety requirements?

| | Center-Based Child Care | Group Home Child Care <input type="checkbox"/> N/A. Check if your State/Territory does not have group home child care. | Family Child Care | In-Home Care <input type="checkbox"/> N/A. Check if in-home care is not subject to licensing in your State/Territory. |
|--------------------------------|-------------------------------------|---|--------------------------|--|
| Yes, for all providers in this | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

| | Center-Based Child Care | Group Home Child Care <input type="checkbox"/> N/A. Check if your State/Territory does not have group home child care. | Family Child Care | In-Home Care <input type="checkbox"/> N/A. Check if in-home care is not subject to licensing in your State/Territory. |
|--|-------------------------|---|---|--|
| category | | | | |
| Yes, for some providers in this category | Describe _____ | Describe | Describe The licensing authority requires that Group Home Providers caring for 6 or fewer than 12 children be licensed. Licensing regulations surrounding health and safety apply to those providers. These providers received a minimum of 2 unannounced visits per year by the licensing agency. The Lead Agency's regulations regarding health and safety apply to providers who are unregulated and are caring for fewer than 6 children not related to the provider by the | Describe _____ |

| | Center-Based Child Care | Group Home Child Care <input type="checkbox"/> N/A. Check if your State/Territory does not have group home child care. | Family Child Care | In-Home Care <input type="checkbox"/> N/A. Check if in-home care is not subject to licensing in your State/Territory. |
|-------|--------------------------|---|---|--|
| | | | third degree. These providers are subject to regular unannounced visits by the Lead Agency. | |
| No | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Other | Describe | Describe | Describe | Describe |

d) CCDF identifies and defines four categories of care: child care centers, family child care homes, group child care homes and in-home child care providers (§98.2). The CCDF definition for each category is listed below. For each CCDF category of care, please identify which types of providers are subject to licensing and which providers are exempt from licensing in your State/Territory in the chart below. **Note: OCC recognizes that each State/Territory identifies and defines its own categories of care. OCC does not expect States/Territories to change their definitions to fit the CCDF-defined categories of care. For these questions, provide responses that closely match the CCDF categories of care but consistent with your reported 801 data.**

| CCDF Category of Care | CCDF Definition (§98.2) | Which providers in your State/Territory are subject to licensing under this CCDF category? | Are any providers in your State/Territory which fall under this CCDF category exempt from licensing? |
|-------------------------|--|---|--|
| Center-Based Child Care | Center-based child care providers are defined as a provider licensed or otherwise authorized to provide child care services for fewer than 24 hours per day per child in a non-residential setting, unless care in excess of 24 hours is due to the nature of the parent(s)' work. | Describe which types of center-based settings are subject to licensing in your State/Territory Center-based child care providers are defined as a provider licensed or otherwise authorized to provide child care services for fewer than 24 hours per day per child in a nonresidential setting, unless care in excess of 24 hours is due to the nature of the parent(s)' work. | Describe which types of center-based settings are exempt from licensing in your State/Territory The Licensing authority exempts the following providers from licensure: A. Child Care facilities which operate for no more than two (2) days a week and whose primary purpose is to provide respite for the caregiver or temporary care during other scheduled or related activities. B. Organized programs that operate for three (3) or less weeks per year such as but not limited to vacation bible schools and scout day camps. C. Any child residential home as defined in and in compliance with the provisions of Section 43-16-3 (b) et seq., Mississippi Code of 1972. D. Any program in an elementary (including kindergarten) and/or secondary school system accredited by the Mississippi State Department of Education, the Southern Association of Colleges and Schools, The Mississippi Private School Association, the American Association of Christian Schools, the Association of Christian Schools International, or a school affiliated with Accelerated Christian Education, Inc. This includes accredited pre-K3 and pre-K4 Programs. Programs serving children less than three (3) years of age must be licensed. E. Any Head Start program operating in conjunction with an elementary school system, whether it is public, private, or parochial, whose primary |

| CCDF Category of Care | CCDF Definition (§98.2) | Which providers in your State/Territory are subject to licensing under this CCDF category? | Are any providers in your State/Territory which fall under this CCDF category exempt from licensing? |
|-----------------------------|----------------------------|---|--|
| | | | <p>purpose is a structured school or school readiness program. This includes Head Start pre-K3 and pre-K4 programs. Head Start programs serving children less than three (3) years of age must be licensed.</p> <p>F. Any family child care home defined in Mississippi Code Section 43-20-53 (a) et seq. To wit: An occupied residence in which shelter and personal care is regularly provided for five (5) or fewer children who are not related within the third degree computed according to the civil law to the provider and who are under 13 years of age and are provided care for any part of the twenty-four hour day. These homes may be voluntarily registered with the Mississippi State Department of Health.</p> <p>G. Any membership organization affiliated with a national organization which charges only a nominal annual membership fee, does not receive monthly, weekly, or daily payments for services, and is certified by its national association as complying with the association's minimum standards and procedures, including, but not limited to, the Boys and Girls Club of America, and the YMCA. A nominal fee is defined as \$300 or less per calendar year.</p> <p>For example, some jurisdictions exempt school-based centers, centers operated by religious organizations, summer camps, or Head Start</p> |

| CCDF Category of Care | CCDF Definition (§98.2) | Which providers in your State/Territory are subject to licensing under this CCDF category? | Are any providers in your State/Territory which fall under this CCDF category exempt from licensing? |
|--|--|--|--|
| | | | programs. |
| Group Home Child Care <input checked="" type="checkbox"/> N/A. Check if your State/Territory does not have group home child care. | Group home child care provider is defined as two or more individuals who provide child care services for fewer than 24 hours per day per child, in a private residence other than the child's residence, unless care in excess of 24 hours is due to the nature of the parent(s)' work. | Describe which types of group homes are subject to licensing | Describe which types of group homes are exempt from licensing |
| Family Child Care | Family child care provider is defined as one individual who provides child care services for fewer than 24 hours per day per child, as the sole caregiver, in a private residence other than the child's residence, unless care in excess of 24 hours is due to the nature of the parent(s)'s work. Reminder - Do not respond if family child care home providers simply must register or be certified to participate in the CCDF program separate from the State/Territory regulatory requirements. | Describe which types of family child care home providers are subject to licensing Providers caring for 6 or fewer than 12 or fewer children in the provider's home are subject to licensing requirements. | Describe which types of family child care home providers are exempt from licensing Providers caring for fewer than 6 children in their home are exempt from licensing requirements. |

| CCDF Category of Care | CCDF Definition (§98.2) | Which providers in your State/Territory are subject to licensing under this CCDF category? | Are any providers in your State/Territory which fall under this CCDF category exempt from licensing? |
|-----------------------|---|---|--|
| In-Home Care | In-home child care provider is defined as an individual who provides child care services in the child's own home. Reminder - Do not respond if in-home child care providers simply must register or be certified to participate in the CCDF program separate from the State/Territory regulatory requirements. | <input checked="" type="checkbox"/> N/A. Check if in-home care is not subject to licensing in your State/Territory. Describe which in-home providers are subject to licensing <input type="text"/> | Describe which types of in-home child care providers are exempt from licensing <input type="text"/> |

Note: In lieu of submitting or attaching licensing regulations to certify the requirements of §98.40(a)(1), Lead Agencies may provide their licensing regulations to the National Resource Center for Health and Safety in Child Care and Early Education. Please check the [NRCKid's website](#) to verify the accuracy of your licensing regulations and provide any updates to the National Resource Center. **Check this box to indicate that the licensing requirements were submitted and verified at NRCKid's.** ☒

e) **Indicate** whether your State/Territory licensing requirements include any of the following four indicators for each category of care*.

* American Academy of Pediatrics, American Public Health Association, National Resource Center for Health and Safety in Child Care and Early Education. (2011) *Caring for Our Children: National Health and Safety Performance Standards; Guidelines for Early Care and Education Programs. 3rd Edition*. Elk Grove Village, IL: American Academy of Pediatrics; Washington, DC: American Public Health Association. Available online at the [NCRKid's website](#).

| Indicator | For each indicator, check all requirements for licensing that apply, if any. | | | |
|--|---|---|--|---|
| | Center-Based Child Care | Group Home Child Care | Family Child Care | In-Home Care |
| | | <input checked="" type="checkbox"/> N/A. Check if your State/Territory does not have group home child care. | | <input checked="" type="checkbox"/> N/A if the State/Territory does not license in-home care (i.e., care in the child's own home) |
| Do the licensing requirements include child : | <input checked="" type="checkbox"/> Yes, Child: staff ratio requirement | <input type="checkbox"/> Yes, Child: staff ratio requirement | <input checked="" type="checkbox"/> Yes, Child: staff ratio requirement. List ratio requirement <input type="text"/> | <input type="checkbox"/> Yes, Child: staff ratio requirement. List ratio requirement by <input type="text"/> |

| Indicator | For each indicator, check all requirements for licensing that apply, if any. | | | |
|--|---|---|--|---|
| | Center-Based Child Care | Group Home Child Care | Family Child Care | In-Home Care |
| staff ratios and group sizes? If yes, provide the ratio for age specified. | Infant ratio (11 months): 5:1 Toddler ratio (35 months): 14:1 Preschool ratio (59 months): 16:1 <input type="checkbox"/> No ratio requirements. <input checked="" type="checkbox"/> Yes, Group size requirement Infant group size (11 months): 10 w/ 2 caregivers Toddler group size (35 months): 14 Preschool group size (59 months): 20 w 2 caregivers <input type="checkbox"/> No group size requirements. | <input checked="" type="checkbox"/> N/A. Check if your State/Territory does not have group home child care. Infant ratio (11 months): Toddler ratio (35 months): Preschool ratio (59 months): <input checked="" type="checkbox"/> No ratio requirements. <input type="checkbox"/> Yes, Group size requirement Infant group size (11 months): Toddler group size (35 months): Preschool group size (59 months): <input checked="" type="checkbox"/> No group size requirements. | by age group: <1 yr=4:1 1 yr =8:1 2 yr =12:1 3 yr =12:1 4 yr =12:1 5-9 yrs = 12:1 10-12 yrs = 12:1 <input type="checkbox"/> No ratio requirements. <input checked="" type="checkbox"/> Yes, Group size requirement. List ratio requirement by age group See above information, not to exceed 12. <input type="checkbox"/> No group size requirements. | <input checked="" type="checkbox"/> N/A if the State/Territory does not license in-home care (i.e., care in the child's own home) age group: <input type="checkbox"/> No ratio requirements. <input type="checkbox"/> Yes, Group size requirement. List ratio requirement by age group <input type="checkbox"/> No group size requirements. |

| Indicator | For each indicator, check all requirements for licensing that apply, if any. | | | |
|---|--|---|--|---|
| | Center-Based Child Care | Group Home Child Care <input type="checkbox"/> N/A. Check if your State/Territory does not have group home child care. | Family Child Care | In-Home Care <input type="checkbox"/> N/A if the State/Territory does not license in-home care (i.e., care in the child's own home) |
| Do the licensing requirements identify specific educational credentials for child care directors ? | <input type="checkbox"/> High school/GED <input type="checkbox"/> Child Development Associate (CDA) <input type="checkbox"/> State/ Territory Credential <input checked="" type="checkbox"/> Associate's degree <input type="checkbox"/> Bachelor's degree <input type="checkbox"/> No credential required for licensing <input type="checkbox"/> Other: | <input type="checkbox"/> High school/GED <input type="checkbox"/> Child Development Associate (CDA) <input type="checkbox"/> State/ Territory Credential <input type="checkbox"/> Associate's degree <input type="checkbox"/> Bachelor's degree <input type="checkbox"/> No credential required for licensing <input type="checkbox"/> Other: | <input type="checkbox"/> High school/GED <input type="checkbox"/> Child Development Associate (CDA) <input type="checkbox"/> State/ Territory Credential <input checked="" type="checkbox"/> Associate's degree <input type="checkbox"/> Bachelor's degree <input type="checkbox"/> No credential required for licensing <input type="checkbox"/> Other: | <input type="checkbox"/> High school/GED <input type="checkbox"/> Child Development Associate (CDA) <input type="checkbox"/> State/ Territory Credential <input type="checkbox"/> Associate's degree <input type="checkbox"/> Bachelor's degree <input type="checkbox"/> No credential required for licensing <input type="checkbox"/> Other: |
| Do the licensing requirements identify specific educational credentials for child care teachers ? | <input checked="" type="checkbox"/> High school/GED <input type="checkbox"/> Child Development Associate (CDA) <input type="checkbox"/> State/ Territory Credential <input type="checkbox"/> Associate's degree <input type="checkbox"/> Bachelor's degree <input type="checkbox"/> No credential required for licensing <input type="checkbox"/> Other: | <input type="checkbox"/> High school/GED <input type="checkbox"/> Child Development Associate (CDA) <input type="checkbox"/> State/ Territory Credential <input type="checkbox"/> Associate's degree <input type="checkbox"/> Bachelor's degree <input type="checkbox"/> No credential required for licensing <input type="checkbox"/> Other: | <input checked="" type="checkbox"/> High school/GED <input type="checkbox"/> Child Development Associate (CDA) <input type="checkbox"/> State/ Territory Credential <input type="checkbox"/> Associate's degree <input type="checkbox"/> Bachelor's degree <input type="checkbox"/> No credential required for licensing <input type="checkbox"/> Other: | <input type="checkbox"/> High school/GED <input type="checkbox"/> Child Development Associate (CDA) <input type="checkbox"/> State/ Territory Credential <input type="checkbox"/> Associate's degree <input type="checkbox"/> Bachelor's degree <input type="checkbox"/> No credential required for licensing <input type="checkbox"/> Other: |
| Do the licensing requirements specify that directors and caregivers must attain a specific number of | <input type="checkbox"/> At least 30 training hours required in first year <input type="checkbox"/> At least 24 training hours per year after first year | <input type="checkbox"/> At least 30 training hours required in first year <input type="checkbox"/> At least 24 training hours per year after first year | <input type="checkbox"/> At least 30 training hours required in first year <input type="checkbox"/> At least 24 training hours per year after first year | <input type="checkbox"/> At least 30 training hours required in first year <input type="checkbox"/> At least 24 training hours per year after first year |

| Indicator | For each indicator, check all requirements for licensing that apply, if any. | | | |
|--------------------------|---|---|---|---|
| | Center-Based Child Care | Group Home Child Care | Family Child Care | In-Home Care |
| | | <input checked="" type="checkbox"/> N/A. Check if your State/Territory does not have group home child care. | | <input checked="" type="checkbox"/> N/A if the State/Territory does not license in-home care (i.e., care in the child's own home) |
| training hours per year? | <input type="checkbox"/> No training requirement <input checked="" type="checkbox"/> Other: 15 Hours annually | <input type="checkbox"/> No training requirement <input type="checkbox"/> Other: | <input type="checkbox"/> No training requirement <input checked="" type="checkbox"/> Other: 15 hours annually | <input type="checkbox"/> No training requirement <input type="checkbox"/> Other: |

f) Do you expect the licensing requirements for child care providers to change in FY2014-2015?

- ☐ Yes. Describe
- ☒ No

3.1.2 Enforcement of Licensing Requirements

Each Lead Agency is required to provide a detailed description of the State/Territory's licensing requirements and how its licensing requirements are effectively enforced. (658E(c)(2)(E), §98.40(a)(2)) The Lead Agency is also required to certify that procedures are in effect to ensure that child care providers caring for children receiving CCDF services comply with the applicable health and safety requirements. (658E(c)(2)(G), §98.41(d))

Describe the State/Territory's policies for effective enforcement of the licensing requirements using questions 3.1.2a through 3.1.2e below. This description includes whether and how the State/Territory uses visits (announced and unannounced), background checks, and any other enforcement policies and practices for the licensing requirements.

a) Does your State/Territory include **announced** and/or **unannounced** visits in its policies as a way to effectively enforce the licensing requirements?

- ☒ Yes. If "Yes" please refer to the chart below and check all that apply.
- ☐ No

| CCDF Categories of Care | Frequency of Routine Announced Visits | Frequency of Routine Unannounced Visits |
|---|---|---|
| <input checked="" type="checkbox"/> Center-Based Child Care | <input type="checkbox"/> Once a Year <input type="checkbox"/> More than Once a Year <input type="checkbox"/> Once Every Two Years <input type="checkbox"/> Other. Describe | <input type="checkbox"/> Once a Year <input type="checkbox"/> More than Once a Year <input type="checkbox"/> Once Every Two Years <input checked="" type="checkbox"/> Other. Describe Twice a year, or as needed to investigate complaints. |

| CCDF Categories of Care | Frequency of Routine Announced Visits | Frequency of Routine Unannounced Visits |
|--|---|--|
| <input type="checkbox"/> Group Home Child Care <input checked="" type="checkbox"/> N/A. Check if your State/Territory does not have group home child care. | <input type="checkbox"/> Once a Year <input type="checkbox"/> More than Once a Year <input type="checkbox"/> Once Every Two Years <input type="checkbox"/> Other. Describe | <input type="checkbox"/> Once a Year <input type="checkbox"/> More than Once a Year <input type="checkbox"/> Once Every Two Years <input type="checkbox"/> Other. Describe |
| <input checked="" type="checkbox"/> Family Child Care Home | <input type="checkbox"/> Once a Year <input type="checkbox"/> More than Once a Year <input type="checkbox"/> Once Every Two Years <input type="checkbox"/> Other. Describe | <input type="checkbox"/> Once a Year <input type="checkbox"/> More than Once a Year <input type="checkbox"/> Once Every Two Years <input checked="" type="checkbox"/> Other. Describe Twice a year, or as needed to investigate complaints. |
| <input type="checkbox"/> In-Home Child Care <input checked="" type="checkbox"/> N/A. Check if In-Home Child Care is not subject to licensing in your State/Territory (skip to 3.1.2b) | <input type="checkbox"/> Once a Year <input type="checkbox"/> More than Once a Year <input type="checkbox"/> Once Every Two Years <input type="checkbox"/> Other. Describe | <input type="checkbox"/> Once a Year <input type="checkbox"/> More than Once a Year <input type="checkbox"/> Once Every Two Years <input type="checkbox"/> Other. Describe |

b) Does your State/Territory have any of the following procedures in place for effective enforcement of the licensing requirements? If procedures differ based on the category of care, please indicate how in the "Describe" box.

- ☐ Yes. If "Yes" please refer to the chart below and check all that apply.
☐ No

| Licensing Procedures | Describe which procedures are used by the State/Territory for enforcement of the licensing requirements. |
|---|---|
| The State/Territory requires providers to attend or participate in training relating to opening a child care facility prior to issuing a license. | <input checked="" type="checkbox"/> Yes. Describe Mandatory trainings include: Playground Safety New Director Orientation Rules and Regulations Governing Child Care <input type="checkbox"/> No. <input type="checkbox"/> Other. Describe |
| The State/Territory has procedures in place for licensing staff to inspect centers and family child care homes prior to issuing a license. | <input checked="" type="checkbox"/> An on-site inspection is conducted. <input type="checkbox"/> Programs self-certify. Describe <input type="checkbox"/> No procedures in place. <input type="checkbox"/> Other. Describe |
| Licensing staff has procedures in place to address violations found in an inspection. | <input checked="" type="checkbox"/> Providers are required to submit plans to correct violations cited during inspections. |

| | |
|--|--|
| Licensing Procedures | Describe which procedures are used by the State/Territory for enforcement of the licensing requirements. |
| | <input checked="" type="checkbox"/> Licensing staff approve the plans of correction submitted by providers. |
| | <input checked="" type="checkbox"/> Licensing staff verify correction of violation. |
| | <input checked="" type="checkbox"/> Licensing staff provide technical assistance regarding how to comply with a regulation. |
| | <input type="checkbox"/> No procedures in place. |
| | <input type="checkbox"/> Other. Describe |
| Licensing staff has procedures in place to issue a sanction to a noncompliant facility. | <input checked="" type="checkbox"/> Provisional or probationary license |
| | <input checked="" type="checkbox"/> License revocation or non-renewal |
| | <input type="checkbox"/> Injunctions through court |
| | <input checked="" type="checkbox"/> Emergency or immediate closure not through court action |
| | <input checked="" type="checkbox"/> Fines for regulatory violations |
| | <input type="checkbox"/> No procedures in place. |
| | <input type="checkbox"/> Other. Describe |
| The State/Territory has procedures in place to respond to illegally operating child care facilities. | <input checked="" type="checkbox"/> Cease and desist action |
| | <input type="checkbox"/> Injunction |
| | <input checked="" type="checkbox"/> Emergency or immediate closure not through court action |
| | <input type="checkbox"/> Fines |
| | <input type="checkbox"/> No procedures in place. |
| | <input type="checkbox"/> Other. Describe |
| The State/Territory has procedures in place for providers to appeal licensing enforcement actions. | <input checked="" type="checkbox"/> Yes. Describe Any operator who disagrees with or is aggrieved by a decision of the licensing agency concerning the suspension, revocation, or restriction of a license may appeal to the Chancery Court of the county in which the child care facility is located. The appeal shall be filed no later than 30 calendar days after the operator receives written notice of the final administrative action by the licensing agency as to the suspension, revocation, or restriction of the license. The operator shall have the burden of proving that the decision of the licensing agency was not in accordance with applicable law and these regulations. If a facility is allowed to continue to operate during the appeal process, it will remain under the regulation of the licensing agency and will be subject to all current licensure |

| | |
|-----------------------------|---|
| Licensing Procedures | Describe which procedures are used by the State/Territory for enforcement of the licensing requirements. |
| | regulations to include, but not limited to, inspection of the facility, review of facility and children's records, submission of all required or requested documents, and payment of all applicable fees and/or monetary penalties. |
| | <input type="checkbox"/> No. |
| | <input checked="" type="checkbox"/> Other. Describe Per the licensing authority, there is also an internal appeal process for provider which contains two levels. One is at the Public Health District level and the other is at the State Level. |

c) Does your State/Territory use **background checks as a way to effectively enforce the licensing requirements?**

☒ Yes. If "Yes" please refer to the chart below to identify who is required to have background checks, what types of checks, and with what frequency.

☐ No

| CCDF Categories of Care | Types of Background Check | Frequency | Who is Subject to Background Checks? |
|--|--|---|--|
| <input checked="" type="checkbox"/> Center-Based Child Care | <input checked="" type="checkbox"/> Child Abuse Registry | <input checked="" type="checkbox"/> Initial Entrance into the System <input type="checkbox"/> Checks Conducted Annually <input checked="" type="checkbox"/> Other. Describe Repeated every 5 years | <input checked="" type="checkbox"/> Director <input checked="" type="checkbox"/> Teaching staff <input checked="" type="checkbox"/> Non-teaching staff <input type="checkbox"/> Volunteers <input checked="" type="checkbox"/> Other Volunteers with over 120 hours on site. |
| | <input checked="" type="checkbox"/> State/Territory Criminal Background <input checked="" type="checkbox"/> Check if State/Territory background check includes fingerprints | <input checked="" type="checkbox"/> Initial Entrance into the System <input type="checkbox"/> Checks Conducted Annually <input checked="" type="checkbox"/> Other. Describe Repeated every 5 years. | <input checked="" type="checkbox"/> Director <input checked="" type="checkbox"/> Teaching staff <input type="checkbox"/> Non-teaching staff <input type="checkbox"/> Volunteers <input checked="" type="checkbox"/> Other Volunteers with over 120 hours on site. |

| CCDF Categories of Care | Types of Background Check | Frequency | Who is Subject to Background Checks? |
|---|--|---|--|
| | <input checked="" type="checkbox"/> FBI Criminal Background (e.g., fingerprint) | <input checked="" type="checkbox"/> Initial Entrance into the System <input type="checkbox"/> Checks Conducted Annually <input checked="" type="checkbox"/> Other. Describe Repeated every 5 years. | <input checked="" type="checkbox"/> Director <input checked="" type="checkbox"/> Teaching staff <input type="checkbox"/> Non-teaching staff <input type="checkbox"/> Volunteers <input checked="" type="checkbox"/> Other Volunteers with over 120 hours on site. |
| | <input checked="" type="checkbox"/> Sex Offender Registry | <input checked="" type="checkbox"/> Initial Entrance into the System <input type="checkbox"/> Checks Conducted Annually <input checked="" type="checkbox"/> Other. Describe Repeated every 5 years. | <input checked="" type="checkbox"/> Director <input checked="" type="checkbox"/> Teaching staff <input type="checkbox"/> Non-teaching staff <input type="checkbox"/> Volunteers <input checked="" type="checkbox"/> Other Volunteers with over 120 hours on site. |
| <input type="checkbox"/> Group Child Care Homes <input checked="" type="checkbox"/> N/A. Check if your State/Territory does not have group home child care. | <input type="checkbox"/> Child Abuse Registry | <input type="checkbox"/> Initial Entrance into the System <input type="checkbox"/> Checks Conducted Annually <input type="checkbox"/> Other. Describe | <input type="checkbox"/> Provider <input type="checkbox"/> Non-provider residents of the home |
| | <input type="checkbox"/> State/Territory Criminal Background <input type="checkbox"/> Check if the State/Territory background check includes fingerprints | <input type="checkbox"/> Initial Entrance into the System <input type="checkbox"/> Checks Conducted Annually <input type="checkbox"/> Other. Describe | <input type="checkbox"/> Provider <input type="checkbox"/> Non-provider residents of the home |
| | <input type="checkbox"/> FBI Criminal Background (e.g., fingerprint) | <input type="checkbox"/> Initial Entrance into the System <input type="checkbox"/> Checks Conducted Annually <input type="checkbox"/> Other. Describe | <input type="checkbox"/> Provider <input type="checkbox"/> Non-provider residents of the home |
| | <input type="checkbox"/> Sex Offender Registry | <input type="checkbox"/> Initial Entrance into the System <input type="checkbox"/> Checks Conducted Annually <input type="checkbox"/> Other. Describe | <input type="checkbox"/> Provider <input type="checkbox"/> Non-provider residents of the home |

| CCDF Categories of Care | Types of Background Check | Frequency | Who is Subject to Background Checks? |
|--|--|---|---|
| <input checked="" type="checkbox"/> Family Child Care Homes | <input checked="" type="checkbox"/> Child Abuse Registry | <input checked="" type="checkbox"/> Initial Entrance into the System <input type="checkbox"/> Checks Conducted Annually <input checked="" type="checkbox"/> Other. Describe Repeated every 5 years, except for those providers who do not move, relocate, or have any gaps in service. | <input checked="" type="checkbox"/> Provider <input checked="" type="checkbox"/> Non-provider residents of the home All adults over the age of 18 years. |
| | <input checked="" type="checkbox"/> State/Territory Criminal Background <input checked="" type="checkbox"/> Check if the State/Territory background check includes fingerprints | <input checked="" type="checkbox"/> Initial Entrance into the System <input checked="" type="checkbox"/> Checks Conducted Annually <input checked="" type="checkbox"/> Other. Describe Repeated every 5 years, except for those providers who do not move, relocate, or have any gaps in service. | <input checked="" type="checkbox"/> Provider <input checked="" type="checkbox"/> Non-provider residents of the home All adults over the age of 18 years. |
| | <input checked="" type="checkbox"/> FBI Criminal Background (e.g., fingerprint) | <input checked="" type="checkbox"/> Initial Entrance into the System <input type="checkbox"/> Checks Conducted Annually <input checked="" type="checkbox"/> Other. Describe Repeated every 5 years, except for those providers who do not move, relocate, or have any gaps in service. | <input checked="" type="checkbox"/> Provider <input checked="" type="checkbox"/> Non-provider residents of the home All adults over the age of 18 years. |
| | <input checked="" type="checkbox"/> Sex Offender Registry | <input checked="" type="checkbox"/> Initial Entrance into the System <input type="checkbox"/> Checks Conducted Annually <input checked="" type="checkbox"/> Other. Describe Repeated every 5 years, except for those providers who do not move, relocate, or | <input checked="" type="checkbox"/> Provider <input checked="" type="checkbox"/> Non-provider residents of the home All adults over the age of 18 years. |

| CCDF Categories of Care | Types of Background Check | Frequency | Who is Subject to Background Checks? |
|---|--|---|--|
| | | have any gaps in service. | |
| <input type="checkbox"/> In-Home Child Care Providers <input checked="" type="checkbox"/> N/A. Check if In-Home Child Care is not subject to licensing in your State/Territory (skip to 3.1.2e) | <input type="checkbox"/> Child Abuse Registry | <input type="checkbox"/> Initial Entrance into the System <input type="checkbox"/> Checks Conducted Annually <input type="checkbox"/> Other. Describe | <input type="checkbox"/> Provider <input type="checkbox"/> Non-provider residents of the home |
| | <input type="checkbox"/> State/Territory Criminal Background <input type="checkbox"/> Check if the State/Territory background check includes fingerprints | <input type="checkbox"/> Initial Entrance into the System <input type="checkbox"/> Checks Conducted Annually <input type="checkbox"/> Other. Describe | <input type="checkbox"/> Provider <input type="checkbox"/> Non-provider residents of the home |
| | <input type="checkbox"/> FBI Criminal Background (e.g., fingerprint) | <input type="checkbox"/> Initial Entrance into the System <input type="checkbox"/> Checks Conducted Annually <input type="checkbox"/> Other. Describe | <input type="checkbox"/> Provider <input type="checkbox"/> Non-provider residents of the home |
| | <input type="checkbox"/> Sex Offender Registry | <input type="checkbox"/> Initial Entrance into the System <input type="checkbox"/> Checks Conducted Annually <input type="checkbox"/> Other. Describe | <input type="checkbox"/> Provider <input type="checkbox"/> Non-provider residents of the home |

d) Please **provide a brief overview** of the State/Territory's process for conducting background checks for child care. In this brief overview, include the following:

d -1) The cost associated with each type of background check conducted The licensing authority charges a fee of \$50 for each individual, for each background check.

d-2) Who pays for background checks Providers

d-3) What types of violations would make providers ineligible for CCDF? Describe Violations concerning child abuse and/or neglect.

d-4) The process for providers to appeal the Lead Agency's decision based on the background check findings. Those unlicensed providers excluded from CCDF participation due to information found on the Child Abuse and Neglect Central Registry can appeal by mailing a letter requesting a Fair Hearing. The provider will remain excluded or allowed to participate in CCDF pending the results of that hearing.

e) If not performing visits (announced or unannounced) or background checks, describe how the State/Territory will ensure that its licensing requirements are effectively enforced per the CCDF regulations? Describe The Lead Agency performs announced and unannounced visits with programs covered under the licensing authority to ensure proper compliance with program policies and requirements. (658E(c)(2)(E), §98.40(a)(2))

f) Does the State/Territory disseminate information to parents and the public, including the use of on-line tools or other "search tools," about child care program licensing status and compliance records?

- ☐ Yes. Describe
☒ No

3.1.3. Compliance with Applicable State/Territory and Local Regulatory Requirements on Health and Safety

Each Lead Agency shall certify that there are in effect, within the State or local law, requirements designed to protect the health and safety of children that are applicable to child care providers of services for which assistance is provided under CCDF. Such requirements shall include the prevention and control of infectious diseases (including immunization), building and physical premises safety, and minimum health and safety training appropriate to the provider setting. These health and safety requirements apply to all providers caring for children receiving CCDF services and which also may be covered by the licensing requirements. (658E(c)(2)(F), §98.41)

☒ Check if the Lead Agency certifies that there are in effect within the State (or other area served by the Lead Agency), under State or local law, requirements designed to protect the health and safety of children; these requirements are applicable to child care providers that provide services for which assistance is made available under the Child Care and Development Fund. (658E(c)(2)(E))

a) **Describe** the Lead Agency's health and safety requirements for prevention and control of infectious disease in effect for child care providers of services for which assistance is provided under CCDF using the table below. (658E(c)(2)(F)(i), §98.41(a)(1))

| The Lead Agency requires: | For each health and safety requirement checked, identify which providers under the CCDF category must meet the requirement. Check all that apply. | | | |
|---|---|-------------------------------------|---------------------------------|-------------------------------------|
| | Center-based child care providers | Family child care home providers | Group home child care providers | In-home child care providers |
| <input type="checkbox"/> Physical exam or health statement for providers | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| <input type="checkbox"/> Physical exam or health statement for children | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| <input checked="" type="checkbox"/> Tuberculosis check for providers | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| <input type="checkbox"/> Tuberculosis check for children | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| <input checked="" type="checkbox"/> Provider immunizations | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| <input checked="" type="checkbox"/> Child immunizations | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| <input checked="" type="checkbox"/> Hand-washing policy for providers and children | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| <input checked="" type="checkbox"/> Diapering policy and procedures | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| <input checked="" type="checkbox"/> Providers to submit a self-certification or complete health and safety checklist | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| <input checked="" type="checkbox"/> Providers to meet the requirements of another oversight entity that fulfill the CCDF health and safety requirements | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| <input type="checkbox"/> Other. Describe | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

b) **Describe** the Lead Agency's health and safety requirements for building and physical premises safety, including policies and practices to protect from environmental hazards, in effect for child care providers of services for which assistance is provided under CCDF using the table below. (658E(c)(2)(F)(ii), §98.41(a)(2))

| The Lead Agency requires: | For each health and safety requirement checked, identify which providers under the CCDF category must meet the requirement. Check all that apply. | | | |
|--|---|-------------------------------------|---------------------------------|-------------------------------------|
| | Center-based child care providers | Family child care home providers | Group home child care providers | In-home child care providers |
| <input checked="" type="checkbox"/> Fire inspection | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| <input checked="" type="checkbox"/> Building inspection | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| <input checked="" type="checkbox"/> Health inspection | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| <input checked="" type="checkbox"/> Inaccessibility of toxic substances policy | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| <input checked="" type="checkbox"/> Safe sleep policy | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

| The Lead Agency requires: | For each health and safety requirement checked, identify which providers under the CCDF category must meet the requirement. Check all that apply. | | | |
|---|---|-------------------------------------|---------------------------------|-------------------------------------|
| | Center-based child care providers | Family child care home providers | Group home child care providers | In-home child care providers |
| <input checked="" type="checkbox"/> Tobacco exposure reduction | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| <input checked="" type="checkbox"/> Transportation policy | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| <input checked="" type="checkbox"/> Providers to submit a self-certification or complete health and safety checklist | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| <input checked="" type="checkbox"/> Providers to meet the requirements of another oversight entity that fulfill the CCDF health and safety requirements | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| <input type="checkbox"/> Other. Describe | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

c) **Describe** the Lead Agency's health and safety requirements for health and safety training in effect for child care providers of services for which assistance is provided under CCDF using the table below. (658E(c)(2)(F)(iii), §98.41(a)(3)). Note: While Lead Agencies have the flexibility to define these terms, for this question, pre-service refers to any training that happens prior to a person starting or shortly thereafter (first week, etc). "On-going" would be some type of routine occurrence (e.g., maintain qualifications each year).

| CCDF Categories of Care | Health and safety training requirements | Pre-Service | On-Going |
|-------------------------|---|---|--|
| Child Care Centers | First Aid | Per the licensing authority, a minimum of one adult who is First Aid certified must be present on or off site where children are presents at all times. | Per the licensing authority, a minimum of one adult who is First Aid certified must be present on or off site where children are present at all times. |
| | CPR | Per the licensing authority, a minimum of one adult who is CPR certified must be present on or off site where children are present at all times. | Per the licensing authority, a minimum of one adult who is CPR certified must be present on or off site where children are present at all times. |
| | Medication Administration | The Lead Agency has no requirements in addition | The Lead Agency has no requirements in addition |

| CCDF Categories of Care | Health and safety training requirements | Pre-Service | On-Going |
|--|---|--|--|
| | Policies and Practices | to those issued by the Licensing Authority. | to those issued by the Licensing Authority. |
| | Poison Prevention and Safety | The Lead Agency has no requirements in addition to those issued by the Licensing Authority. | The Lead Agency has no requirements in addition to those issued by the Licensing Authority. |
| | Safe Sleep Practices including Sudden Infant Death Syndrome (SIDS) Prevention | The Lead Agency has no requirements in addition to those issued by the Licensing Authority. | The Lead Agency has no requirements in addition to those issued by the Licensing Authority. |
| | Shaken Baby Syndrome and abusive head trauma prevention | The Lead Agency has no requirements in addition to those issued by the Licensing Authority. | The Lead Agency has no requirements in addition to those issued by the Licensing Authority. |
| | Age appropriate nutrition, feeding, including support for breastfeeding | The Lead Agency has no requirements in addition to those issued by the Licensing Authority. | The Lead Agency has no requirements in addition to those issued by the Licensing Authority. |
| | Physical Activities | The Lead Agency has no requirements in addition to those issued by the Licensing Authority. | The Lead Agency has no requirements in addition to those issued by the Licensing Authority. |
| | Procedures for preventing the spread of infectious disease, including sanitary methods and safe handling of foods | The licensing authority requires that personnel who prepare food be ServeSafe/TummySafe certified. | The licensing authority requires that personnel who prepare food maintain ServeSafe/TummySafe certified. |
| | Recognition and mandatory reporting of suspected child abuse and neglect | The Lead Agency has no requirements in addition to those issued by the Licensing Authority. | The Lead Agency has no requirements in addition to those issued by the Licensing Authority. |
| | Emergency preparedness and planning response | The Lead Agency has no requirements in addition to those issued by the Licensing Authority. | The Lead Agency has no requirements in addition to those issued by the Licensing Authority. |

| CCDF Categories of Care | Health and safety training requirements | Pre-Service | On-Going |
|--|--|---|---|
| | procedures | | |
| | Management of common childhood illnesses, including food intolerances and allergies | The Lead Agency has no requirements in addition to those issued by the Licensing Authority. | The Lead Agency has no requirements in addition to those issued by the Licensing Authority. |
| | Transportation and child passenger safety (if applicable) | The Lead Agency has no requirements in addition to those issued by the Licensing Authority. | The Lead Agency has no requirements in addition to those issued by the Licensing Authority. |
| | Caring for children with special health care needs, mental health needs, and developmental disabilities in compliance with the Americans with Disabilities (ADA) Act | The Lead Agency has no requirements in addition to those issued by the Licensing Authority. | The Lead Agency has no requirements in addition to those issued by the Licensing Authority. |
| | Child development including knowledge of developmental stages and milestones appropriate for the ages of children receiving services. | The Lead Agency has no requirements in addition to those issued by the Licensing Authority. | The Lead Agency has no requirements in addition to those issued by the Licensing Authority. |
| | Supervision of children | The Lead Agency has no requirements in addition to those issued by the Licensing Authority. | The Lead Agency has no requirements in addition to those issued by the Licensing Authority. |
| | Behavior management | The Lead Agency has no requirements in addition to those issued by the Licensing Authority. | The Lead Agency has no requirements in addition to those issued by the Licensing Authority. |
| | Other. Describe | | |
| Group | First Aid | The State does not have | The State does not have |

| CCDF Categories of Care | Health and safety training requirements | Pre-Service | On-Going |
|--|---|---|---|
| Home Child Care | | Group Home Child Care. | Group Home Child Care. |
| | CPR | The State does not have Group Home Child Care. | The State does not have Group Home Child Care. |
| | Medication Administration Policies and Practices | The State does not have Group Home Child Care. | The State does not have Group Home Child Care. |
| | Poison Prevention and Safety | The State does not have Group Home Child Care. | The State does not have Group Home Child Care. |
| | Safe Sleep Practices including Sudden Infant Death Syndrome (SIDS) Prevention | The State does not have Group Home Child Care. | The State does not have Group Home Child Care. |
| | Shaken Baby Syndrome and abusive head trauma prevention | The State does not have Group Home Child Care. | The State does not have Group Home Child Care. |
| | Age appropriate nutrition, feeding, including support for breastfeeding | The State does not have Group Home Child Care. | The State does not have Group Home Child Care. |
| | Physical Activities | The State does not have Group Home Child Care. | The State does not have Group Home Child Care. |
| | Procedures for preventing the spread of infectious disease, including sanitary methods and safe handling of foods | The State does not have Group Home Child Care. | The State does not have Group Home Child Care. |
| | Recognition and mandatory reporting of suspected child abuse and neglect | The State does not have Group Home Child Care. | The State does not have Group Home Child Care. |
| | Emergency preparedness | The State does not have Group Home Child Care. | The State does not have Group Home Child Care. |

| CCDF Categories of Care | Health and safety training requirements | Pre-Service | On-Going |
|------------------------------------|--|--|--|
| | and planning response procedures | | |
| | Management of common childhood illnesses, including food intolerances and allergies | The State does not have Group Home Child Care. | The State does not have Group Home Child Care. |
| | Transportation and child passenger safety (if applicable) | The State does not have Group Home Child Care. | The State does not have Group Home Child Care. |
| | Caring for children with special health care needs, mental health needs, and developmental disabilities in compliance with the Americans with Disabilities (ADA) Act | The State does not have Group Home Child Care. | The State does not have Group Home Child Care. |
| | Child development including knowledge of developmental stages and milestones appropriate for the ages of children receiving services. | The State does not have Group Home Child Care. | The State does not have Group Home Child Care. |
| | Supervision of children | The State does not have Group Home Child Care. | The State does not have Group Home Child Care. |
| | Behavior management | The State does not have Group Home Child Care. | The State does not have Group Home Child Care. |
| | Other. Describe | | |
| Family Child Care Providers | First Aid | All licensed facilities, homes and unregulated providers are required to | Teachers/care providers in licensed facilities/homes and |

| CCDF Categories of Care | Health and safety training requirements | Pre-Service | On-Going |
|--------------------------------|---|---|--|
| | | have at least one adult who is First Aid certified in each classroom/home at all times. All licensed facilities/homes are monitored for compliance by the licensing authority. All unregulated care providers are monitored for compliance by the Lead Agency. | unregulated providers are required to maintain First Aid certification at all times. All licensed families/homes are monitored for compliance by the licensing authority. All unregulated care providers are monitored for compliance by the Lead Agency. |
| | CPR | All licensed facilities, homes and unregulated providers are required to have at least one adult who is CPR certified in each classroom/home at all times. All licensed facilities/homes are monitored for compliance by the licensing authority. All unregulated care providers are monitored for compliance by the Lead Agency. | Teachers/care providers in licensed facilities/homes and unregulated providers are required to maintain CPR certification at all times. All licensed families/homes are monitored for compliance by the licensing authority. All unregulated care providers are monitored for compliance by the Lead Agency. |
| | Medication Administration Policies and Practices | The Lead Agency has no requirements in addition to those issued by the licensing authority. | The Lead Agency has no requirements in addition to those issued by the licensing authority. |
| | Poison Prevention and Safety | The Lead Agency has no requirements in addition to those issued by the licensing authority. | The Lead Agency has no requirements in addition to those issued by the licensing authority. |
| | Safe Sleep Practices including Sudden Infant Death Syndrome (SIDS) Prevention | The Lead Agency has no requirements in addition to those issued by the licensing authority. | The Lead Agency has no requirements in addition to those issued by the licensing authority. |
| | Shaken Baby Syndrome and abusive head | The Lead Agency has no requirements in addition to those issued by the | The Lead Agency has no requirements in addition to those issued by the |

| CCDF Categories of Care | Health and safety training requirements | Pre-Service | On-Going |
|--------------------------------|---|---|---|
| | trauma prevention | licensing authority. | licensing authority. |
| | Age appropriate nutrition, feeding, including support for breastfeeding | The Lead Agency has no requirements in addition to those issued by the licensing authority. | The Lead Agency has no requirements in addition to those issued by the licensing authority. |
| | Physical Activities | The Lead Agency has no requirements in addition to those issued by the licensing authority. | The Lead Agency has no requirements in addition to those issued by the licensing authority. |
| | Procedures for preventing the spread of infectious disease, including sanitary methods and safe handling of foods | The licensing authority requires licensed facilities/homes ensure personnel preparing food are ServeSafe/TummySafe certified. | The licensing authority requires licensed facilities/homes ensure personnel preparing food maintain ServeSafe/TummySafe certification at all times. |
| | Recognition and mandatory reporting of suspected child abuse and neglect | The Lead Agency has no requirements in addition to those issued by the licensing authority. | The Lead Agency has no requirements in addition to those issued by the licensing authority. |
| | Emergency preparedness and planning response procedures | The Lead Agency has no requirements in addition to those issued by the licensing authority. | The Lead Agency has no requirements in addition to those issued by the licensing authority. |
| | Management of common childhood illnesses, including food intolerances and allergies | The Lead Agency has no requirements in addition to those issued by the licensing authority. | The Lead Agency has no requirements in addition to those issued by the licensing authority. |
| | Transportation and child passenger safety (if applicable) | The Lead Agency has no requirements in addition to those issued by the licensing authority. | The Lead Agency has no requirements in addition to those issued by the licensing authority. |
| | Caring for children with special health care needs, | The Lead Agency has no requirements in addition to those issued by the licensing authority. | The Lead Agency has no requirements in addition to those issued by the licensing authority. |

| CCDF Categories of Care | Health and safety training requirements | Pre-Service | On-Going |
|---|---|--|---|
| | mental health needs, and developmental disabilities in compliance with the Americans with Disabilities (ADA) Act | | |
| | Child development including knowledge of developmental stages and milestones appropriate for the ages of children receiving services. | The Lead Agency has no requirements in addition to those issued by the licensing authority. | The Lead Agency has no requirements in addition to those issued by the licensing authority. |
| | Supervision of children | The Lead Agency has no requirements in addition to those issued by the licensing authority. | The Lead Agency has no requirements in addition to those issued by the licensing authority. |
| | Behavior management | The Lead Agency has no requirements in addition to those issued by the licensing authority. | The Lead Agency has no requirements in addition to those issued by the licensing authority. |
| | Other. Describe <div></div> | | |
| In-Home Child Care Providers | First Aid | Per the Lead Agency, all unregulated care providers are required to be First Aid certified. | Per the Lead Agency, all unregulated care providers are required to maintain First Aid certification. |
| | CPR | Per the Lead Agency, all unregulated care providers are required to be First Aid certified. | Per the Lead Agency, all unregulated care providers are required to maintain First Aid certification. |
| | Medication Administration Policies and Practices | The Lead Agency has no training requirements for In-Home Providers on this topic at this time. | The Lead Agency has no training requirements for In-Home Providers on this topic at this time. |
| | Poison Prevention and | The Lead Agency has no training requirements for | The Lead Agency has no training requirements for |

| CCDF Categories of Care | Health and safety training requirements | Pre-Service | On-Going |
|--|---|--|--|
| | Safety | In-Home Providers on this topic at this time. | In-Home Providers on this topic at this time. |
| | Safe Sleep Practices including Sudden Infant Death Syndrome (SIDS) Prevention | The Lead Agency has no training requirements for In-Home Providers on this topic at this time. | The Lead Agency has no training requirements for In-Home Providers on this topic at this time. |
| | Shaken Baby Syndrome and abusive head trauma prevention | The Lead Agency has no training requirements for In-Home Providers on this topic at this time. | The Lead Agency has no training requirements for In-Home Providers on this topic at this time. |
| | Age appropriate nutrition, feeding, including support for breastfeeding | The Lead Agency has no training requirements for In-Home Providers on this topic at this time. | The Lead Agency has no training requirements for In-Home Providers on this topic at this time. |
| | Physical Activities | The Lead Agency has no training requirements for In-Home Providers on this topic at this time. | The Lead Agency has no training requirements for In-Home Providers on this topic at this time. |
| | Procedures for preventing the spread of infectious disease, including sanitary methods and safe handling of foods | The Lead Agency has no training requirements for In-Home Providers on this topic at this time. | The Lead Agency has no training requirements for In-Home Providers on this topic at this time. |
| | Recognition and mandatory reporting of suspected child abuse and neglect | The Lead Agency has no training requirements for In-Home Providers on this topic at this time. | The Lead Agency has no training requirements for In-Home Providers on this topic at this time. |
| | Emergency preparedness and planning response procedures | The Lead Agency has no training requirements for In-Home Providers on this topic at this time. | The Lead Agency has no training requirements for In-Home Providers on this topic at this time. |
| | Management of common childhood | The Lead Agency has no training requirements for In-Home Providers on | The Lead Agency has no training requirements for In-Home Providers on |

| CCDF Categories of Care | Health and safety training requirements | Pre-Service | On-Going |
|--------------------------------|--|--|--|
| | illnesses, including food intolerances and allergies | this topic at this time. | this topic at this time. |
| | Transportation and child passenger safety (if applicable) | The Lead Agency has no training requirements for In-Home Providers on this topic at this time. | The Lead Agency has no training requirements for In-Home Providers on this topic at this time. |
| | Caring for children with special health care needs, mental health needs, and developmental disabilities in compliance with the Americans with Disabilities (ADA) Act | The Lead Agency has no training requirements for In-Home Providers on this topic at this time. | The Lead Agency has no training requirements for In-Home Providers on this topic at this time. |
| | Child development including knowledge of developmental stages and milestones appropriate for the ages of children receiving services. | The Lead Agency has no training requirements for In-Home Providers on this topic at this time. | The Lead Agency has no training requirements for In-Home Providers on this topic at this time. |
| | Supervision of children | The Lead Agency has no training requirements for In-Home Providers on this topic at this time. | The Lead Agency has no training requirements for In-Home Providers on this topic at this time. |
| | Behavior management | The Lead Agency has no training requirements for In-Home Providers on this topic at this time. | The Lead Agency has no training requirements for In-Home Providers on this topic at this time. |
| | Other. Describe [REDACTED] | | |

d) CCDF allows Lead Agencies to exempt relative providers (grandparents, great-grandparents, siblings if living in a separate residence, aunts, and

uncles) from these health and safety requirements. What are the Lead Agency's requirements for relative providers? (§98.41(A)(ii)(A))

- ☐ All relative providers are subject to the same health and safety requirements as described in 3.1.2a-c, as appropriate; there are no exceptions for relatives.
- ☐ Relative providers are NOT required to meet any health and safety requirements as described in 3.1.2a-c, as appropriate.
- ☒ Relative providers are subject to certain requirements. Describe the different requirements Relative providers are exempt from obtaining Immunization Forms when they only care for their relatives.

e) Provide a web address for the State/Territory's health and safety requirements, if available: Please refer to the Mississippi Child Care Payment Program Policy Manual link found at, http://www.mdhs.state.ms.us/eccd_mschildcare.html

3.1.4 Effective enforcement of the CCDF health and safety requirements.

For providers who care for children receiving CCDF assistance and who are NOT subject to the enforcement procedures described in 3.1.2 for licensed providers, please describe how the Lead Agency enforces the CCDF health and safety enforcement requirements.

The Lead Agency makes unannounced visits to monitor compliance with all program requirements throughout the program year. These visits may be conducted by Lead Agency subsidy staff, or by the MDHS Division of Program Integrity staff. During these visits, staff monitor the presence of all elements related to payment claims, operation, enrollment of children, and health and safety practices as required upon initial provider approval.

- a) Describe whether and how the Lead Agency uses on-site visits (announced and unannounced)
The Lead Agency makes annual unannounced visits to unlicensed providers to ensure compliance with required elements.
- b) Describe whether the Lead Agency uses background checks
The Lead Agency requires that providers and anyone in the home over the age of 18 submit to a Child Abuse and Neglect Criminal Background Check.
- c) Does the Lead Agency permit providers to self-certify compliance with applicable health and safety standards?
☒ Yes. If yes, what documentation, if any, is required? Describe
The Lead Agency requires that all unlicensed providers submit a checklist containing various statements related to health and safety issues related to caring for children.
☐ No

- d) Describe whether the Lead Agency uses any other enforcement policies and practices for the health and safety requirements [NA](#)

☒ Check if the Lead Agency certifies that procedures are in effect to ensure that child care providers of services for which assistance is provided under the Child Care and Development Fund comply with all applicable State or local health and safety requirements. (658E(c)(2)(G))

3.1.5. Does the State/Territory encourage or require child care programs to conduct developmental screening and referral for children participating in child care programs?

Lead Agencies are not required to conduct developmental screenings of children, but are encouraged to work with child care providers to promote screening in the areas of physical health (including vision and hearing), mental health, oral health, and developmental disabilities.

- ☐ Yes. Describe [\[redacted\]](#)
☒ No

a) If yes, are training, resources and supports offered to programs to assist them in ensuring that children receive appropriate developmental screenings?

- ☐ Yes. Describe [\[redacted\]](#)
☐ No
☐ Other. Describe [\[redacted\]](#)

b) If yes, are resources and supports provided to programs to help them understand how families are referred to indicated services and how to work with the health, mental health, and developmental disabilities agencies to support children when follow-up to screening is needed?

- ☐ Yes. Describe [\[redacted\]](#)
☐ No
☐ Other. Describe [\[redacted\]](#)

c) Does the State/Territory use developmental screening and referral tools?

- ☐ Yes. If Yes, provide the name of the tool(s) [\[redacted\]](#)
☒ No
☐ Other. Describe [\[redacted\]](#)

3.1.6 Data & Performance Measures on Licensing and Health and Safety Compliance –

What data elements, if any, does the State/Territory currently have access to related to licensing compliance? What, if any, performance measures does the Lead Agency use for ensuring health and safety? The purpose of these questions is for Lead Agencies to provide a description of their capacity to provide information, not to

require Lead Agencies to collect or report this information. For any data elements checked in (a) below, Lead Agencies may provide an optional description about the data they have access to (e.g., the Lead Agency may have data for only licensed programs, only programs caring for children receiving CCDF subsidies, only providers participating in quality improvement systems, or only for certain age groups (e.g., infants and toddlers or school-age children).

a) Data on licensing and health and safety. Indicate if the Lead Agency or another agency has access to data on:

- ☒ Number of licensed programs. Describe (optional) The Mississippi Department of Health, Division of Child Care Licensure manages this data. They report the number of licensed programs as 1,636.
- ☐ Numbers of programs operating that are legally exempt from licensing. Describe (optional) _____
- ☒ Number of programs whose licenses were suspended or revoked due to non-compliance. Describe (optional) The Mississippi Department of Health, Division of Child Care Licensure manages this data. They reported that 0 program licenses were suspended/revoked during the last fiscal year.
- ☒ Number of injuries in child care as defined by the State/Territory. Describe (optional) The Mississippi Department of Health, Division of Child Care Licensure manages this data. They report 6 incidences of injuries during the last fiscal year.
- ☒ Number of fatalities in child care as defined by the State/Territory. Describe (optional) The Mississippi Department of Health, Division of Child Care Licensure manages this data.
- ☒ Number of monitoring visits received by programs. Describe (optional) The Mississippi Department of Health, Division of Child Care Licensure manages this data. They report at least two visits to all programs that were licensed during the last fiscal year.
- ☒ Caseload of licensing staff. Describe (optional) The Mississippi Department of Health, Division of Child Care Licensure manages this data.
- ☒ Number of programs revoked from CCDF due to non-compliance with health and safety requirements. Describe (optional) The Lead Agency would manage this data. Zero (0) programs were revoked during the last fiscal year due to non-compliance with health and safety requirements.
- ☐ Other. Describe _____
- ☐ None

b) Performance measurement. What, if any, performance measures does the State/Territory use in its licensing system to monitor compliance with CCDF health and safety requirements? The licensing authority does not check for provider compliance with CCDF health and safety requirements.

c) Evaluation. What, if any, are the State/Territory's plans for evaluation

related to licensing and health and safety? Evaluation can include efforts related to monitoring implementation of an initiative, validation of standards or assessment tools, or looking at outcomes in programs or the system and may be ongoing or conducted periodically. [The Lead Agency would like to evaluate the health and safety requirements of both the subsidy program and the licensing authority to compare to national health and safety standards. This comparison would be used to evaluate those changes that are needed to increase health and safety of care environments and inform policy/regulation changes.](#)

3.1.7 Goals for the next Biennium –

In this section, Lead Agencies are asked to identify at least one goal for the upcoming biennium and are encouraged to identify no more than five priority goals total. ACF will target technical assistance efforts to help Lead Agencies achieve their goal(s). Lead Agencies may include existing goals (e.g., already identified in a State strategic plan or established by the Governor for a Lead Agency). Lead Agencies are not required to establish a goal for each sub-section of 3.1. Lead Agencies will report progress and updates on these goals in the annual Quality Performance Report (Appendix 1), including any barriers encountered.


What are the Lead Agency's goals for the licensing and health and safety system in the coming biennium? What progress does the State/Territory expect to make on core areas (e.g. licensing standards, monitoring visits or other effective enforcement, improved technical assistance, or fewer serious non-compliances?)

Note – When identifying your goals below, Lead Agencies are encouraged to begin with an action verb reflecting the desired result over the two year period (e.g., Increase, Improve, Build, Align, Implement, Review, Revise, Streamline, Expand, etc.)

| |
|--|
| Goal 1 – Increase health and safety requirements for unlicensed providers participating in CCDF to align with proposed ACF requirements. |
| Goal 2 – Increase public knowledge of licensed providers including license effective dates and any infractions. |
| Goal 3 – Build an interface between licensing and subsidy data systems to ensure consistency of data. |
| Goal 4 - |
| Goal 5 - |



CCDF has a number of performance measures that are used to track progress for key aspects of the program at the national level. These performance measures are included in budget materials submitted to Congress and other documents. Please see the [CCDF performance measures](#). A number of these performance measures rely on information reported in the State and Territorial Plans as a data source. We have

added a ruler icon  in Section 3.2 through 3.4 in order to identify the specific questions used in the performance measures. When answering these questions, Lead Agencies should ensure that their answers are accurate and complete in order to promote the usefulness and integrity of the performance measures.

3.2 Establishing Voluntary Early Learning Guidelines (Component #2)

For purposes of this section, voluntary early learning guidelines (also referred to as early learning and development standards) include the expectations for what children should know (content) and be able to do (skills) at different levels of development. These standards provide guidelines, articulate developmental milestones, and set expectations for the healthy growth and development of young children. The term *early learning guidelines* (ELGs) refers to age-appropriate developmental learning guidelines for infants and toddlers and school-age children. These early learning guidelines are voluntary because States/Territories are not required to develop such guidelines or implement them in a specified manner.

3.2.1 Has the State/Territory developed voluntary early learning guidelines for children? Check any early learning guidelines the State/Territory has developed.

- ☒ Birth-to-three
- ☒ Three-to-five
- ☐ Five years and older
- ☐ None. **Skip to 3.2.6.**

If yes, insert web addresses, where possible:

Birth to Three: www.earlychildhood.msstate.edu;

Three to Five: www.mde.k12.ms.us

Which State/Territory agency is the lead for the early learning guidelines?

Birth to Three: Mississippi Office of Head Start Collaboration;

Three to Five: Mississippi Department of Education

3.2.2 Do the early learning guidelines cover a range of domains across physical, cognitive, and social and emotional development?

Check all that apply for each age group as applicable in the chart below. Because States vary in their domain names and which domains to include, we have used the domains identified in the Head Start Child Development and Early Learning Framework for reference purposes.

| Domains | Birth-to-Three ELGs | Three-to-Five ELGs | Five and Older ELGs |
|-------------------------------------|-------------------------------------|-------------------------------------|----------------------------|
| Physical development and health | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Social and emotional development | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Approaches to learning | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Logic and reasoning (e.g., problem- | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |

| Domains | Birth-to-Three ELGs | Three-to-Five ELGs | Five and Older ELGs |
|---|-------------------------------------|-------------------------------------|--------------------------|
| solving) | | | |
| Language development | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Literacy knowledge and skills | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Mathematics knowledge and skills | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Science knowledge and skills | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Creative arts expression (e.g., music, art, drama) | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Social studies knowledge and skills | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| English language development (for dual language learners) | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| List any domains not covered in the above _____ | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Other. Describe _____ | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

3.2.3 To whom are the early learning guidelines disseminated and in what manner?

Check all audiences and methods that your State/Territory has chosen to use in the chart below.

| | Information Dissemination | Voluntary Training | Mandatory Training |
|--|-------------------------------------|-------------------------------------|--------------------------|
| Parents in the child care subsidy system | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Parents using child care more broadly | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Practitioners in child care centers | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Providers in family child care homes | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Practitioners in Head Start | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Practitioners in Early Head Start | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Practitioners in public Pre-K program | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Practitioners in elementary schools | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Other. List _____ | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |



3.2.4 Are voluntary early learning guidelines incorporated into other parts of the child care system?

Check which ways, if any, the State/Territory incorporates its early learning guidelines into other parts of the child care system.

- ☐ To define the content of training required to meet licensing requirements
☒ To define the content of training required for program quality

improvement standards (e.g., QRIS standards)

- ☐ To define the content of training required for the career lattice or professional credential
- ☐ To require programs in licensing standards to develop curriculum/learning activities based on the voluntary ELGs
- ☐ To require programs in quality improvement standards to develop curriculum/learning activities based on the voluntary ELGs
- ☐ To develop State-/Territory –approved curricula
- ☐ Other. List
- ☐ None.



3.2.5 Are voluntary early learning guidelines and development standards aligned with into other parts of the child care system?

Check the standards, if any, with which the State/Territory aligns its early learning guidelines.

- ☒ Cross-walked to align with Head Start Child Development and Early Learning Framework
- ☒ Cross-walked to align with K-12 content standards
- ☐ Cross-walked to align with State/Territory pre-k standards
- ☐ Cross-walked with accreditation standards
- ☐ Other. List
- ☐ None.

3.2.6 Describe how your State/Territory uses ongoing assessments and measures of school readiness assessment using the following series of questions.

In this section, assessment is framed with two distinct purposes/tools – 1) ongoing assessment of children’s progress within the classroom to improve and individualize instruction (this corresponds to 3.2.6a) and 2) assessments conducted within pre-kindergarten and/or at kindergarten entry to inform policymakers about the school readiness of children across the State on a broad range of domains, used to guide program initiatives (this corresponds to 3.2.6b).

In the description for each Yes response, please include a) who administers, and b) how often assessments are conducted, and c) what assessment tools are used.

- a) Are programs required to conduct ongoing assessments of children’s progress of children using valid, reliable and age-appropriate tools aligned with the early learning guidelines or other child standards?

☐ Yes. Describe

a-1) If yes, are programs encouraged to use information from ongoing assessments to improve practice and individual children’s needs?

- ☐ Yes. Describe
- ☐ No

☐ Other. Describe

a-2) If yes, is information on child's progress reported to parents?

☐ Yes. Describe

☐ No

☐ Other. Describe

☒ No

☐ Other. Describe

b) Does the State/Territory use tools that are valid, reliable and age-appropriate to track the readiness of children within pre-kindergarten and/or as they enter kindergarten?

☐ Yes. Describe

b-1) If yes, do the tools cover the developmental domains identified in 3.2.2?

☐ Yes. Describe

☐ No

☐ Other. Describe

b-2) If yes, are the tools used on all children or samples of children?

☐ All children. Describe

☐ Samples of children. Describe

☐ Other. Describe

b-3) If yes, is the information from the school readiness measures used to target program quality improvement activities?

☐ Yes. Describe

☐ No

☐ Other. Describe

☒ No

☐ Other. Describe

c) Is school readiness information linked to the statewide longitudinal data system (SLDS, program of the Department of Education)?

☐ Yes. Describe

☒ No

☐ Not applicable. State does not have an SLDS.

3.2.7 Data & Performance Measures on Voluntary Early Learning Guidelines –

What data elements, if any, does the State/Territory have access to on the dissemination of, implementation of, or children's attainment of the early learning guidelines? What, if any, performance measures does the State/Territory use for dissemination and implementation of the early learning guidelines? The purpose of

these questions is for Lead Agencies to provide a description of their capacity to provide information, not to require Lead Agencies to collect or report this information. For any data elements checked in (a) below, Lead Agencies may provide an optional description about the data they have access to (e.g., the Lead Agency may have data for only licensed programs, only programs caring for children receiving CCDF subsidies, only providers participating in quality improvement systems, or only for certain age groups (e.g., infants and toddlers or school-age children).

a) **Data on voluntary early learning guidelines.** Indicate if the Lead Agency or another agency has access to data on:

- ☒ Number/percentage of child care providers trained on ELG's for preschool aged children. Describe (optional) The Mississippi Child Care Resource & Referral Network reports 2,823 providers were trained on preschool ELGs in the last program year.
- ☒ Number/percentage of child care providers trained on ELG's for infants and toddlers. Describe (optional) The Mississippi Child Care Resource & Referral Network reports 3,231 providers were trained on infant/toddler ELGs in the last program year.
- ☒ Number of programs using ELG's in planning for their work. Describe (optional) The Mississippi Child Care Resource & Referral Network reports 564 providers are using the ELGs in their work.
- ☐ Number of parents trained on or served in family support programs that use ELG's. Describe (optional)
- ☐ Other. Describe
- ☐ None

b) **Performance measurement.** What, if any, are the Lead Agency's performance measures related to dissemination and implementation of the early learning guidelines?

The Lead Agency funds the MSCCR&R Network. The scope of services for this contract requires that regular ongoing trainings related to each component of the ELGs are offered across the state in person and through distance learning.

c) **Evaluation.** What are the State/Territory's plans, if any, for evaluation related to early learning guidelines and the progress of children in child care? Evaluation can include efforts related to monitoring implementation of an initiative validation of standards or program assessment tools, or looking at outcomes in programs or the system and may be ongoing or conducted periodically.

The Lead Agency plans to use the SLDS to determine the number of providers currently working in childcare that have received the ELG trainings. Additionally, the Lead Agency is working with the MSCCR&R to add advanced trainings on the ELGs for those providers who have mastered

the introductory level trainings.

3.2.8 Goals for the next Biennium –

In this section, Lead Agencies are asked to identify at least one goal for the upcoming biennium. Lead Agencies are encouraged to include measurable and achievable goals. Lead Agencies may include existing goals (e.g., already identified in a State strategic plan or established by the Governor for a Lead Agency). ACF will target technical assistance efforts to help Lead Agencies achieve their goal(s). What are the Lead Agency's goals for using voluntary early learning guidelines in the coming biennium? What progress does the Lead Agency expect to make related to early learning guidelines?

Goal 1: Expand provider knowledge of the application of ELG principles by advanced training.

Goal 2: Assess the feasibility of assessing children using the developmental checklists included in the ELGs for all children in programs where they are being implemented.

3.3 Creating Pathways to Excellence for Child Care Programs through Program Quality Improvement Activities (Component #3)

Many States have chosen to use targeted quality funds and other resources to develop a systematic framework for evaluating, improving, and communicating the level of quality in early childhood programs (i.e. QRIS). States and Territories will provide a self-assessment on current program quality improvement activities by responding to questions in this section and then describe their goals for the upcoming Biennium.

For purposes of this section, States and Territories will respond according to a Quality Rating and Improvement System (QRIS) framework. QRIS refers to a systematic framework for evaluating, improving and communicating the level of quality in early childhood programs and contains five key elements:

1. Program standards
2. Supports to programs to improve quality
3. Financial incentives and supports
4. Quality assurance and monitoring
5. Outreach and consumer education

While not all States and Territories have developed or implemented a formal QRIS, all are pursuing quality improvement strategies that can be described within this framework (based upon previous CCDF Plans). Using this framework to organize this section allows States/Territories to report on their quality improvement activities systematically whether they have a QRIS or not. Over time, States and Territories are encouraged to work on linking their quality improvement initiatives and strategies across all of these elements, culminating in a comprehensive Quality Rating and Improvement System with adequate support for providers to attain higher levels of quality and transparency for parents and the community regarding the quality of child care.

a) Describe which entities are involved in planning and administering the program quality improvement activities in 3.3, including State/Territory entities and local or community level entities.

The Mississippi Child Care Quality Step System is a star-based QRIS system currently funded by state funds and CCDF Quality funds. The Mississippi State University Early Childhood Institute implements this program. The Lead Agency and MSU ECI collaborate on best practices related to this program's administration and implementation.

3.3.1 Element 1 – Program Standards

Definition – For purposes of this section, program standards refers to the expectations for quality, or quality indicators, which identify different levels of and pathways to improved quality. Minimum licensing standards and health and safety requirements provided in section 3.1 are also program standards but in this section, we focus on those standards that build upon and go beyond those minimum requirements.



a) Does your State/Territory's have quality improvement standards that include indicators covering the following areas beyond what is required for licensing? Check any indicators, if any, that your State/Territory has chosen to establish.

- ☐ Ratios and group size
- ☐ Health, nutrition and safety
- ☒ Learning environment and curriculum
- ☒ Staff/Provider qualifications and professional development
- ☒ Teacher/providers-child relationships
- ☒ Teacher/provider instructional practices
- ☒ Family partnerships and family strengthening
- ☒ Community relationships
- ☒ Administration and management
- ☐ Developmental screenings
- ☐ Child assessment for the purposes of individualizing instruction and/or targeting program improvement
- ☒ Cultural competence
- ☐ Other. Describe
- ☐ None. If checked, skip to 3.3.2.

b) Does your State/Territory have quality improvement standards with provisions about the care of any of these groups of children? Check any provisions your State/Territory has chosen to establish.

- ☐ Children with special needs as defined by your State/Territory
- ☐ Infants and toddlers
- ☐ School-age children
- ☐ Children who are dual language learners

☐ None

c) How do your State/Territory's quality standards link to State/Territory licensing requirements? Check any links between your State/Territory's quality standards and licensing requirements.

- ☒ Licensing is a pre-requisite for participation
☒ Licensing is the first tier of the quality levels
☐ State/Territory license is a "rated" license.
☐ Other. Describe
☐ Not linked.

d) Do your State/Territory's quality improvement standards align with or have reciprocity with any of the following standards? Check any alignment, if any, between your State/Territory's quality standards and other standards.

- ☐ Programs that meet State/Territory pre-k standards are able to meet all or part of the quality improvement standards (e.g., content of the standards is the same, or there is a reciprocal agreement between pre-k and the quality improvement system)
☐ Programs that meet Federal Head Start Performance Standards are able to meet all or part of the quality improvement standards (e.g., content of the standards is the same, or there is a reciprocal agreement between Head Start and the quality improvement system)
☐ Programs that meet national accreditation standards are able to meet all or part of the quality improvement standards (e.g., content of the standards is the same, or an alternative pathway to meeting the standards)
☐ Other. Describe
☐ None

3.3.2 Element 2 –Supports to Programs to Improve Quality

Definition – For purposes of this section, supports to programs to improve quality refers to such activities as technical assistance and consultation services for programs to assist in meeting child care quality improvement standards.



a) Check which types of and for what purposes the State/Territory uses supports to child care programs, if any, in the following chart. If none, skip to 3.3.3.

| Types and Purposes of Support | Information or Written Materials | Training | On-Site Consultation |
|--|-------------------------------------|-------------------------------------|-------------------------------------|
| <input type="checkbox"/> Attaining and maintaining licensing compliance | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| <input checked="" type="checkbox"/> Attaining and maintaining quality improvement standards beyond licensing | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> |

| Types and Purposes of Support | Information or Written Materials | Training | On-Site Consultation |
|---|----------------------------------|-------------------------------------|-------------------------------------|
| <input type="checkbox"/> Attaining and maintaining accreditation | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| <input checked="" type="checkbox"/> Providing targeted technical assistance in specialized content areas: | | | |
| Health and safety | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> |
| Infant/toddler care | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> |
| School-age care | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> |
| Inclusion | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> |
| Teaching dual language learners | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> |
| Mental health | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> |
| Business management practices | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> |
| Other. Describe | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| <input type="checkbox"/> None. Skip to 3.3.3. | | | |

b) Methods used to customize quality improvement supports to the needs of individual programs include:

- ☒ Program improvement plans
- ☒ Technical assistance on the use of program assessment tools
- ☐ Other. Describe

c) Is technical assistance linked to entering the QRIS or targeted to help programs forward on QRIS?

- ☒ Yes. Describe The MS Child Care Resource and Referral Network, Partners for Quality Care, and the Allies for Quality Care program provide onsite technical assistance designed to improve a licensed program's rating in the QRIS.
- ☐ No
- ☐ Other. Describe

3.3.3 Element 3 – Financial Incentives and Supports

Definition – For purposes of this section, financial incentives refers to the types of monetary supports offered to programs in meeting and sustaining licensing and QRIS or other child care quality improvement standards for programs.



a) Identify which types of financial incentives are offered and to which providers in the following chart. Check which incentives and supports, if any, the State/Territory chooses to offer. If none, skip to 3.3.4.

| Types of Financial Incentives and Supports for Programs | Child Care Centers | Child Care Homes | License-Exempt Providers |
|---|-------------------------------------|--------------------------|---------------------------------|
| <input type="checkbox"/> Grants to programs to meet or maintain licensing | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| <input type="checkbox"/> Grants to programs to meet QRIS or similar quality level | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| <input type="checkbox"/> One-time awards or bonuses on completion of quality standard attainment | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| <input checked="" type="checkbox"/> Tiered reimbursement tied to quality for children receiving subsidy | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| <input type="checkbox"/> On-going, periodic grants or stipends tied to improving/maintaining quality | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| <input type="checkbox"/> Tax credits tied to meeting program quality standards | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| <input type="checkbox"/> Other. Describe | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| <input type="checkbox"/> None. Skip to 3.3.4. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

3.3.4 – Element 4 - Quality Assurance and Monitoring

Definition – For purposes of this section, quality assurance and monitoring refers to the ways that the State/Territory measures program quality for the purposes of its QRIS or other quality improvement system and the methods for measuring that the child care quality improvement standards for programs are met initially and maintained over time.



a) What tools, if any, does the State/Territory use to measure and monitor the quality of programs? Check all that apply and briefly describe using the chart below, including which programs are required to participate and the frequency of assessments. **If none, skip to 3.3.5.**

| Types of Program Quality Assessment Tools | Child Care Centers | Child Care Homes | License-Exempt Providers |
|--|--|--------------------------|---------------------------------|
| <input checked="" type="checkbox"/> Environment Rating Scales (e.g., ECERS, ITERS, SACERS, FDCRS) Describe, including frequency of assessments. Pre/Post | <input checked="" type="checkbox"/> Infant/Toddler <input checked="" type="checkbox"/> Preschool <input type="checkbox"/> School-Age | <input type="checkbox"/> | <input type="checkbox"/> |
| <input type="checkbox"/> Classroom Assessment Scoring System (CLASS) Describe, including frequency of assessments. | <input type="checkbox"/> | N/A | <input type="checkbox"/> |
| <input type="checkbox"/> Program Administration Scale (PAS) for child care centers or Business Administration Scale (BAS) for family child care homes | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

| Types of Program Quality Assessment Tools | Child Care Centers | Child Care Homes | License-Exempt Providers |
|--|--------------------------|--------------------------|--------------------------|
| Describe, including frequency of assessments. [redacted] | | | |
| <input type="checkbox"/> Customized instrument, including submission of written documentation, developed for State/Territory quality improvement system. This may include instruments developed for quality improvements in 21 st Century Learning Center programs Describe, including frequency of assessments. [redacted] | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| <input type="checkbox"/> Other. Describe [redacted] | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| <input type="checkbox"/> None. Skip to 3.3.5. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

b) What steps, if any, has the State/Territory taken to align quality assurance and monitoring across funding streams and sectors in order to minimize duplication?

- ☒ Have a mechanism to track different quality assessments/monitoring activities to avoid duplication
- ☐ Include QRIS or other quality reviews as part of licensing enforcement
- ☐ Have compliance monitoring in one sector (e.g., Head Start/Early Head Start, State/Territory pre-k) serve as validation for compliance with quality improvement system (e.g., QRIS) without further review
- ☐ Have monitoring for meeting accreditation standards serve as validation for compliance with quality improvement system (e.g., QRIS) without further review
- ☐ Other. Describe [redacted]
- ☐ None

3.3.5 – Element 5 - Outreach and Consumer Education

Definition – For purposes of this section, outreach and consumer education refers to the strategies used to promote the child care quality improvement standards to parents, programs and the general public.



a) Does the State/Territory use symbols or simple icons to communicate levels of quality for child care programs beyond what may communicated to parents about licensing status and licensing compliance as reported in 3.1.3? (e.g. stars, or gold/silver/bronze levels).

- ☒ Yes. If yes, how is it used?

- ☒ Resource and referral/consumer education services use with parents seeking care
- ☐ Parents enrolling in child care subsidy are educated about the system and the quality level of the provider that they are selecting
- ☒ Searchable database on the web
- ☒ Voluntarily, visibly posted in programs
- ☐ Mandatory to post visibly in programs
- ☐ Used in marketing and public awareness campaigns
- ☐ Other. Describe
- ☐ No. If no, skip to 3.3.6.

b) Does the State/Territory use any forms of media to reach parents and the public to communicate about levels of quality for child care programs? Check which forms, if any, the State/Territory uses to communicate levels of quality for child care programs.

- ☒ Print
- ☐ Radio
- ☐ Television
- ☒ Web
- ☐ Telephone
- ☐ Social Marketing
- ☐ Other. Describe
- ☐ None

c) Describe any targeted outreach for culturally and linguistically diverse families.

The Lead Agency has developed print media to illustrate what a quality child care environment looks like through photographs and very few words. This is designed for non-English speaking parents and low literacy parents.

3.3.6. Quality Rating and Improvement System (QRIS)



a) **Based on the five key elements of a QRIS described above in 3.3.1 through 3.3.5**, does your State/Territory have a quality rating and improvement system (QRIS) or similar quality improvement system in place?

- ☒ Yes, the State/Territory has a QRIS or similar quality improvement system that includes linked activities in all five elements operating State/Territory-wide.
 - ☒ Participation is voluntary for All licensed child care providers.
 - ☐ Participation is mandatory for _____
- ☐ Yes, the State/Territory has a QRIS or similar quality improvement system that includes linked activities in all five elements operating as a pilot or in a few localities but not State/Territory-wide.

- ☐ No, the State/Territory does not have a QRIS or similar quality improvement system that includes linked activities in all five elements.
- ☐ State/Territory is in the development phase
- ☐ State/Territory has no plans for development
- ☐ Other. Describe



b) If yes to 3.3.6a, **CHECK** the types of providers eligible to participate in the QRIS:

- ☒ Child care centers
- ☐ Group child care homes
- ☐ Family child care homes
- ☐ In-home child care
- ☐ License exempt providers
- ☐ Early Head Start programs
- ☒ Head Start programs
- ☒ Pre-kindergarten programs
- ☐ School-age programs
- ☐ Other. Describe

3.3.7. If the State/Territory has or will have any quality improvement strategies for targeted groups of providers (e.g., relative caregivers or caregivers who are legally exempt from licensing) that are not described in your responses to any question in section 3.3 above, please describe

At this time, the Lead Agency is working with the Mississippi State University Extension Service to pilot a QRIS program for out-of-school programs and for family child care providers.

3.3.8 Data & Performance Measures on Program Quality –

What data elements, if any, does the State/Territory currently have access to related to the quality of programs? What, if any, does the State/Territory use for performance measures on program quality improvement? The purpose of these questions is for Lead Agencies to provide a description of their capacity to provide information, not to require Lead Agencies to collect or report this information. For any data elements checked in (a) below, Lead Agencies may provide an optional description about the data they have access to (e.g., the Lead Agency may have data for only licensed programs, only programs caring for children receiving CCDF subsidies, only providers participating in quality improvement systems, or only for certain age groups (e.g., infants and toddlers or school-age children).

a) **Data on program quality.** Indicate if the Lead Agency or another agency has access to data on:

- ☒ Data on the quality level for individual programs (e.g. QRIS level) as defined by your State/Territory. Describe (optional)
- ERS software currently tracks all QRIS program activity. This data is housed at the Mississippi State University Early Childhood Institute.

- ☐ Number of programs that move program quality levels annually (up or down). Describe (optional) _____
- ☐ Program scores on program assessment instruments. List instruments: _____ Describe (optional) _____
- ☒ Classroom scores on program assessment instruments. List instruments: **ITERS-R & ECERS-R** Describe (optional) _____
- ☒ Qualifications for teachers or caregivers within each program. Describe (optional) _____
- This information is maintained by the Professional Development registry housed at the MS Child Care Resource & Referral Network**
- ☒ Number/Percentage of children receiving CCDF assistance in licensed care. Describe (optional) **The Lead Agency houses this information in CCIS.**
- ☒ Number/percentage of children receiving CCDF assistance who attend care at each of the tiers of the quality as defined by the State/Territory **The Lead Agency houses this information in CCIS.**
- ☒ Number/Percentage of programs receiving financial assistance to meet higher program standards. Describe (optional) **The Lead Agency houses this information in CCPS.**
- ☐ Other. Describe _____
- ☐ None

b) **Performance measurement.** What, if any, are the Lead Agency's performance measures on program quality?

The Lead Agency supports providers in their efforts to improve program quality. The Lead Agency considers a score of 3.0 on either the ITERS-r or ECERS-R to indicate basic/minimal levels of quality.

c) **Evaluation.** What, if any, are the State/Territory's plans for evaluation related to program quality? Evaluation can include efforts related to monitoring implementation of an initiative, validation of standards or assessment tools, or looking at outcomes in programs or the system and may be ongoing or conducted periodically.

The Lead Agency is funding the evaluation and validation of the QRIS in the upcoming year. The resulting information will be made to identify strategies to improve QRIS implementation and increase program quality.

3.3.9 Goals for the next Biennium –

In this section, Lead Agencies are asked to identify at least one goal for the upcoming biennium. Lead Agencies are encouraged to include measurable and achievable goals. Lead Agencies may include existing goals (e.g., already identified in a State strategic plan or established by the Governor for a Lead Agency). ACF will target technical assistance efforts to help Lead Agencies achieve their goal(s). Lead Agencies are not required to establish a goal for each sub-section in 3.3. What are the State/Territory's goals for the program quality improvement system in the coming biennium? What progress does the State/Territory expect to make across the five key elements for quality improvement systems?

Goal 1: Assess the overall functioning of the QRIS.

Goal 2: Increase parental knowledge about provider quality ratings.

3.4 Pathways to Excellence for the Workforce – Professional Development Systems and Workforce Initiatives (Component #4)

Pathways to excellence for the workforce builds on the significant investments States and Territories have made in the area of professional development systems to ensure a well-qualified workforce with opportunities for growth from entry level through master teacher, with an increasing emphasis on the many additional roles in the child care system (e.g. adult educators such as consultants, technical assistance providers, trainers, and higher education faculty). In this section, States and Territories provide a self-assessment on current professional development and workforce activities and describe their goals for the upcoming Biennium.

For purposes of this section, States and Territories will respond according to five key elements for workforce systems:

- 1) Core Knowledge and Competencies
 - 2) Career Pathways (or Career Lattice)
 - 3) Professional Development Capacity
 - 4) Access to Professional Development
 - 5) Compensation, Benefits and Workforce Conditions
- a) Describe which entities are involved in planning and administering the activities in Section 3.4, including State/Territory entities and local or community level entities.

Mississippi is beginning to engage in discussions surrounding these activities through the work of the Mississippi Early Childhood Advisory Council. At this time the Lead Agency supports access to professional development by funding the Mississippi Child Care Resource and Referral Network and other programs to offer professional development training offered at no cost to participants.

3.4.1 Workforce Element 1 - Core Knowledge and Competencies

Definition – For purposes of this section, core knowledge and competencies (CKCs) refers to the expectations for what the workforce should know (content) and be able to do (skills) in their role working with and/or on behalf of children and their families. These CKCs provide a foundation for professional development design (including instructional practices) and other quality improvement efforts.



- a) Has the State/Territory developed core knowledge and competencies (CKCs) for practitioners working with and/or on behalf of children?

☐ Yes

☒ No, the State/Territory has not developed core knowledge and competencies. Skip to question 3.4.2.

☐ Other. Describe

If yes, insert web addresses, where possible:

b) Check which of the following teaching and learning topics, if any, are covered in the CKCs.

- ☐ Child growth, development and learning
- ☐ Health, nutrition, and safety
- ☐ Learning environment and curriculum
- ☐ Interactions with children
- ☐ Family and community relationships
- ☐ Professionalism and leadership
- ☐ Observation and assessment
- ☐ Program planning and management
- ☐ Diversity
- ☐ Other. Describe
- ☐ None

c) Are the CKCs incorporated into other parts of the child care system? Check which ways, if any, the State/Territory incorporates its CKCs into other parts of the child care system.

- ☐ To define the content of training required to meet licensing requirements
- ☐ To define the content of training required for program quality improvement standards (as reported in section 3.3)
- ☐ To define the content of training required for the career lattice or credential
- ☐ To correspond to the early learning guidelines
- ☐ To define curriculum and degree requirements at institutions of higher education
- ☐ Other. Describe
- ☐ None

d) Are the CKCs aligned with other State/Territory or national standards? Check which ways, if any, the State/Territory aligns its CKCs with other standards.

- ☐ Cross-walked with the Child Development Associate (CDA) competencies
- ☐ Cross-walked with national teacher preparation standards (e.g., NAEYC standards for early childhood professional preparation, National Board of Professional Teaching Standards, National Council for Accreditation of Teacher Education/Council for the Accreditation of Educator Preparation, Head Start SOLAR staff skills indicators)
- ☐ Cross-walked with apprenticeship competencies
- ☐ Other. Describe
- ☐ None

e) Check for which roles, if any, the State/Territory developed supplemental or specialized competencies.

- ☐ Staff working directly with children in centers, including aides, assistants, teachers, master teachers. Describe _____
- ☐ Providers working directly with children in family child care homes, including aides and assistants. Describe _____
- ☐ Administrators in centers (including educational coordinators, directors). Describe _____
- ☐ Technical assistance providers (including mentors, coaches, consultants, home visitors, etc.). Describe _____
- ☐ Education and training staff (such as trainers, CCR&R staff, faculty). Describe _____
- ☐ Other. Describe _____
- ☐ None

f) Check if the State/Territory has developed any supplemental or specialized competencies for practitioners/providers working with the following ages.

- ☐ Birth-to-three
- ☐ Three-to-five
- ☐ Five and older
- ☐ Other. Describe _____
- ☐ None

3.4.2 Workforce Element 2 - Career Pathways

Definition – For purposes of this section, career pathways (or career lattice) defines the options and sequence of qualifications and ongoing professional development to work with children. Career pathways assist professionals in understanding their career options and identify steps for advancement for the workforce recognizing and rewarding higher levels of preparation and mastery of practice to promote higher quality services for children.



a) Does the State/Territory have a career pathway which defines the sequence of qualifications related to professional development (education, training and technical assistance) and experience required to work with children?

- ☐ Yes. Describe _____
- ☒ No, the State/Territory has not developed a career pathway. Skip to question 3.4.3.

Insert web addresses, where possible: _____

b) Check for which roles, if any, the career pathways include qualifications, specializations or credentials.

- ☐ Staff working directly with children in centers, including aides, assistants, teachers, master teachers. Describe _____
- ☐ Providers working directly with children in family child care homes, including aides and assistants. Describe _____
- ☐ Administrators in centers (including educational coordinators, directors). Describe _____
- ☐ Technical assistance providers (including mentors, coaches, consultants, home visitors, etc.). Describe _____
- ☐ Education and training staff (such as trainers, CCR&R staff, faculty). Describe _____
- ☐ Other. Describe _____
- ☐ None

c) Does the career pathways (or lattice) include specializations or credentials, if any, for working with any of the following children?

- ☐ Infants and toddlers
- ☐ Preschoolers
- ☐ School-age children
- ☐ Dual language learners
- ☐ Children with disabilities, children with developmental delays, and children with other special needs
- ☐ Other. Describe _____
- ☐ None

d) In what ways, if any, is the career pathway (or lattice) used?

- ☐ Voluntary guide and planning resource
- ☐ Required placement for all practitioners and providers working in programs that are licensed or regulated in the State/Territory to serve children birth to 13
- ☐ Required placement for all practitioners working in programs that receive public funds to serve children birth to 13
- ☐ Required placement for adult educators (i.e., those that provide training, education and/or technical assistance)
- ☐ Required placement for participation in scholarship and/or other incentive and support programs
- ☐ Required placement for participation in the QRIS or other quality improvement system
- ☐ Other. Describe _____
- ☐ None

e) Are individuals' qualifications, professional development, and work experience verified prior to placement on the career pathway (or lattice)?

- ☐ Yes. If yes, describe _____
- ☐ No

3.4.3 Workforce Element 3 – Professional Development Capacity

Definition – For purposes of this section, professional development incorporates higher education, training and technical assistance. Higher education capacity refers to capability of the higher education system to meet the needs of the diverse workforce including the provision of content that addresses the full range of development and needs of children. Training and technical assistance capacity refers to capability of the training and technical assistance system to meet the needs of the diverse workforce including the provision of content that addresses the full range of development and needs of children. Early childhood includes infants, toddlers and preschoolers.



a) Has the State/Territory assessed the availability of degree programs in early-childhood education, school-age care or youth development, and related fields in the State/Territory (e.g., both physical location and distance-based, accessibility to practitioners, etc.)?

- ☐ Yes. If yes, describe
☒ No



b) Has the State/Territory assessed the availability of early-childhood and school-age and related training and technical assistance programs in the State/Territory (e.g., both physical location and distance-based, degree level, etc.)?

- ☐ Yes. If yes, describe
☒ No

c) What quality assurance mechanisms, if any, are in place for the degree programs and courses offered by the State/Territory institutions?

- ☒ Standards set by the institution
☒ Standards set by the State/Territory higher education board
☐ Standards set by program accreditors
☐ Standards set by State/Territory departments of education
☐ Standards set by national teacher preparation accrediting agencies
☐ Other. Describe
☐ None

d) What quality assurance mechanisms, if any, are in place for the training and technical assistance programs offered by the State/Territory?

- ☐ Training approval process. Describe
☒ Trainer approval process. Describe All T&TA staff are evaluated by supervisors monthly.
☐ Training and/or technical assistance evaluations. Describe
☐ Other. Describe
☐ None

e) Does the State/Territory have articulation agreements in place across and within institutions of higher education?

- ☐ Yes. If yes, describe
☒ No

f) Does the State/Territory have articulation agreements that translate training and/or technical assistance into higher education credit?

- ☐ Yes. If yes, describe
☒ No

3.4.4 Workforce Element 4 – Access to Professional Development

Definition – For purposes of this section, access to professional development (training, education and technical assistance) refers to the degree to which practitioners are made aware of, and receive supports and assistance to utilize, professional development opportunities.



a) Does the State/Territory have professional development opportunities accessible for professionals in various or all sectors of the early childhood and school-age field?

- ☒ Yes. If yes, for which sectors?
☒ Child care
☒ Head Start/Early Head Start
☒ Pre-Kindergarten
☐ Public schools
☒ Early intervention/special education
☐ Other. Describe
- ☐ No

b) Does the State/Territory have a State/Territory-wide, coordinated and easily accessible clearinghouse of information about professional development opportunities available to all members of the early childhood and school-age workforce? Lead Agencies are not required to have a professional development system, but States/Territories may develop such clearinghouses to promote access to professional development opportunities.

- ☒ Yes. If yes, describe
[This information is disseminated through the Mississippi Child Care Resource and Referral Network.](#)
☐ No

Insert web addresses, where possible: www.msucares.com/childcare

c) What supports, if any, does the State/Territory provide to promote access to training and education activities?

- ☒ Scholarships. Describe Scholarships are offered to providers in order to attain a CDA
- ☒ Free training and education. Describe All training and technical assistance is offered free of charge to all participants.
- ☐ Reimbursement for training and education expenses. Describe
- ☐ Grants. Describe
- ☐ Loans. Describe
- ☐ Loan forgiveness programs. Describe
- ☐ Substitute pools. Describe
- ☐ Release time. Describe
- ☐ Other. Describe
- ☐ None

d) Does the State/Territory have career advisors for early childhood and school-age practitioners?

- ☐ Yes. If yes, describe
- ☒ No

e) Does the State/Territory have mentors, coaches, consultants, and/or other specialists available to provide technical assistance to the workforce?

- ☒ Yes. If yes, describe
The Lead Agency funds several programs that provide mentoring and coaching to the workforce. Programs include the MS Child Care Resource and Referral Network, Allies for Quality Care, CDA Scholarship Program, Nurturing Homes Initiative, Partners for Quality Care and Project PREPARE.
- ☐ No

3.4.5 Workforce Element 5- Compensation, Benefits and Workforce Conditions

Definition – For purposes of this section, rewards for education and training refers to any financial supports provided to practitioners for participating in and completing education or training or for increasing compensation.



a) Does the State/Territory have a salary or wage scale for various professional roles?

- ☐ Yes. If yes, describe
- ☒ No



b) Does the State/Territory provide financial rewards for participation in professional development, such as one-time salary bonuses for completing a training or education program?

- ☒ Yes. If yes, describe **One time bonuses are provided to individuals who complete their Child Development Associate certification through the use of SAC Head Start ARRA funds.**
- ☐ No



c) Does the State/Territory provide sustained financial support on a periodic, predictable basis, such as annual wage supplements, based on the highest level of training and education achieved?

- ☐ Yes. If yes, describe
- ☒ No

d) Does the State/Territory have a program to offer or facilitate benefits (e.g. health insurance coverage, retirement, etc.) to the workforce?

- ☐ Yes. If yes, describe
- ☒ No

3.4.6 Data & Performance Measures on the Child Care Workforce –

What data elements, if any, does the State/Territory currently have access to related to the child care workforce? What, if any, does the State/Territory use for performance measures on professional development and workforce initiatives? The purpose of these questions is for Lead Agencies to provide a description of their capacity to provide information, not to require Lead Agencies to collect or report this information. For any data elements checked in (a) below, Lead Agencies may provide an optional description about the data they have access to (e.g., the Lead Agency may have data for only licensed programs, only programs caring for children receiving CCDF subsidies, only providers participating in quality improvement systems, or only for certain age groups (e.g., infants and toddlers or school-age children).

a) **Data on the child care workforce.** Indicate if the Lead Agency or another agency has access to data on:

- ☒ Data on the size of the child care workforce. Describe (optional)
- ☐ Data on the demographic characteristics of practitioners or providers working directly with children. Describe (optional)
- ☒ Records of individual teachers or caregivers and their qualifications. Describe (optional)
- ☐ Retention rates. Describe (optional)
- ☐ Records of individual professional development specialists and their qualifications. Describe (optional)
- ☐ Qualifications of teachers or caregivers linked to the programs in

- which they teach. Describe (optional) _____
- ☒ Number of scholarships awarded . Describe (optional) _____
- ☐ Number of individuals receiving bonuses or other financial rewards or incentives. Describe (optional) _____
- ☐ Number of credentials and degrees conferred annually. Describe (optional) _____
- ☐ Data on T/TA completion or attrition rates. Describe (optional) _____
- ☐ Data on degree completion or attrition rates. Describe (optional) _____
- ☐ Other. Describe _____
- ☐ None

b) Does the State/Territory have a workforce data system, such as a workforce registry, which tracks workforce demographics, compensation, and qualifications and ongoing professional development for practitioners working with children birth to age 13?

Definition– For purposes of this section, a workforce data system refers to a system, such as a workforce registry, that tracks the size and characteristics of the child care workforce, including longitudinal data to monitor changes over time. The data system also can produce records to validate and verify qualifications or ongoing professional development for licensing, accreditation, QRIS, wage incentives, and credentials.

☐ Yes.

b-1) If yes, which roles are included in the workforce data system? For each role checked, indicate in your description whether participation is voluntary or mandatory.

- ☐ Staff working directly with children in centers, including aides, assistants, teachers, master teachers. Describe _____
- ☐ Providers working directly with children in family child care homes, including aides and assistants. Describe _____
- ☐ Administrators in centers (including educational coordinators, directors). Describe _____
- ☐ Technical assistance providers (including mentors, coaches, consultants, home visitors, etc.). Describe _____
- ☐ Education and training staff (such as trainers, CCR&R staff, faculty). Describe _____
- ☐ Other. Describe _____
- ☐ None

b-2) Does the workforce data system apply to:

- ☐ all practitioners working in programs that are licensed

or regulated by the State/Territory to serve children birth to 13?

☐ all practitioners working in programs that receive public funds to serve children birth to age 13?

☒ No

c) **Performance measurement.** What, if any, performance measures does the State/Territory use related to its workforce and professional development systems?

The Lead Agency is currently participating in the work of the State Early Childhood Advisory Council. This Council has taken on workforce development as one of its priorities.

d) **Evaluation.** What, if any, are the State/Territory's plans for evaluation related to its workforce and professional development systems? Evaluation can include efforts related to monitoring implementation of an initiative, validation of standards or assessment tools, or looking at outcomes in programs or the system and may be ongoing or conducted periodically.

The Lead Agency is dedicated to the continued development of a comprehensive, functional professional development system in Mississippi.

3.4.7 Goals for the next Biennium –

In this section, Lead Agencies are asked to identify at least one goal for the upcoming biennium and are encouraged to identify no more than five priority goals total. ACF will target technical assistance efforts to help Lead Agencies achieve their goal(s). Lead Agencies may include existing goals (e.g., already identified in a State strategic plan or established by the Governor for a Lead Agency). Lead Agencies are not required to establish a goal for each sub-section in 3.4. Lead Agencies will report progress and updates on these goals in the annual Quality Performance Report (Appendix 1), including any barriers encountered.

What are the State/Territory's goals for the building the professional development system and improving conditions for the workforce in the coming biennium? What progress does the State/Territory expect to make across the five key elements for the workforce and professional development system described above?

Note – When identifying your goals below, Lead Agencies are encouraged to begin with an action verb reflecting the desired result over the two year period (e.g., Increase, Improve, Build, Align, Implement, Review, Revise, Streamline, Expand, etc.)

| |
|---|
| Goal 1 – Improve functionality of a professional development tracking system that allows for greater knowledge about the workforce. |
| Goal 2 – Determine retention rates of professionals in the workforce with a degree. |
| Goal 3 – Build a single system for trainers and technical assistants in all Lead Agency funded programs to use. |

| |
|--|
| Goal 4 – Initiate efforts to develop standards and competencies for trainers and technical assistants. |
| Goal 5 – Review data related to training and technical assistance programs to identify gaps, and opportunities for expansion of support. |

AMENDMENTS LOG

CHILD CARE AND DEVELOPMENT FUND PLAN FOR: _____
FOR THE PERIOD: 10/1/11 – 9/30/12

Lead Agencies are required to request approval from Administration for Children and Families (ACF) whenever a “substantial” change in the Lead Agency’s approved CCDF plan occurs. Please refer to the [ACF Program Instruction regarding CCDF Plan amendments](#) for more information.

Plan amendments must be submitted to ACF within 60 days of the effective date of the change. Under the regulation, the plan amendment must be approved no later than the 90th day following the date on which the amendment is received by ACF unless the Lead Agency and ACF mutually agree in writing to extend the period. (§98.18 (b)).

ACF encourages Lead Agencies to contact the Child Care program staff in the appropriate ACF Regional Office to discuss any proposed amendment as early as possible.

Instructions for Submitting Amendments:

Complete the first 3 columns of the Amendment Log and send a copy of the Log (showing the latest amendment sent to ACF) and the amended section(s) to the ACF Regional Office contact. Lead Agency also should indicate the Effective Date of the amended section in the footer at the bottom of the amended page(s). A copy of the Log, showing the latest amendment pending in ACF, is retained as part of the Lead Agency's Plan.

ACF will complete column 4 and returns a photocopy of the Log to the grantee following its review and approval of the amendment. The Lead Agency replaces this page in the Plan with the copy of the Log received from ACF showing the approval date.

Note: This process depends on repeated subsequent use of the same Log page over the life of the Plan. At any time the Log should reflect all amendments, both approved and pending in ACF. The Lead Agency is advised to retain "old" plan pages that are superseded by amendments in a separate appendix to its Plan. This is especially important as auditors will review CCDF Plans and examine effective date of changes.

APPENDIX 1

QUALITY PERFORMANCE REPORT

This annual report will be submitted to ACF no later than December 31, 2014 and will reflect the period October 1, 2013 through September 30, 2014. Lead Agencies will leave this report blank when the Plan is initially submitted.

In this report, Lead Agencies are asked about the State/Territory's progress in meetings its goals as reported in the FY 2014-2015 CCDF Plan, and provide available data on the results of those activities. At a minimum, Lead Agencies are expected to respond to the first question in each section of the Quality Performance Report (QPR) which asks for their progress toward meeting their goal(s) articulated in Part 2 and Part 3 of the CCDF Plan for this Biennium.

Because of the flexibility in administering the CCDF program, it is expected that Lead Agencies may not have information and data available to respond to all questions. A Describe box is provided for each question for Lead Agencies to provide descriptive context for data reported and narrative updates in each data section, including any plans for reporting data in the future, if actual data is not currently available or if specific questions are not applicable. Lead Agencies may use data collected by other agencies and entities (e.g., CCR&R agencies or other contractors) as appropriate. The term Lead Agency is used in questions when the data relate to a CCDF-specific activity, otherwise the term State/Territory is used when another entity may be responsible or involved with an activity (e.g., licensing).

The purpose of this annual report is to capture State/Territory progress on improving the quality of child care. Specifically, this report will:

- Provide a national assessment of State's and Territory's progress toward improving the quality of child care, including a focus on program quality and child care workforce quality;
- Track State's and Territory's annual progress toward meeting high quality indicators and benchmarks, including those that they set for themselves in their CCDF Plans and those that are of interest to the U.S. Department of Health and Human Services in measuring CCDF program performance;
- Assist national and State/Territory technical assistance efforts to help States/Territories make strategic use of quality funds; and
Assist with program accountability

This report collects progress on the five goals identified in Part 2 and Part 3 of the Child Care and Development Fund (CCDF) Plan for FY2014-2015 along with key data in relation to the four components of child care quality used as a quality framework in Part 3 of the Child Care and Development Fund Plan for FY 2014-2015:

1. Ensuring health and safety of children through licensing and health and safety

- standards
- 2. Establishing early learning guidelines
- 3. Creating pathways to excellence for child care programs through program quality improvement activities
- 4. Creating pathways to an effective, well-supported child care workforce through professional development systems and workforce initiatives.

Ensuring the Health and Safety of Children (Component #1)

In this section, Lead Agencies provide information on the minimum health and safety standards and activities in effect over the past year as of September 30, 2014.

A1.1 Progress on Overall Goals

Based on the goals described in the Lead Agency's CCDF Plan at Section 3.1.7, please report your progress using the chart below.

You may include any significant areas of progress that were not anticipated in the Plan, as well. For each goal listed, briefly describe the improvement with specific examples or numeric targets where possible (e.g., revised licensing regulation to include elements related to SIDS prevention, lowered caseload of licensing staff to 1:50, or increased monitoring visits to twice annually for child care centers). If applicable, describe any barriers to implementing your planned goals.

| Goals Described in FY 2014-2015 CCDF Plan | Describe Progress – Include Examples and Numeric Targets where Possible |
|---|---|
| | |
| | |

Note: If your licensing standards changed during this period, please provide a brief summary of the major changes and submit the updated regulations to the [National Resource Center for Health and Safety in Child Care](#). _____

A1.2 Key Data

OCC is collecting this information as one part of our overall effort to better understand States/Territories' activities to improve the quality of child care. OCC recognizes that the data requested in this report will only provide part of that picture because there are many factors which affect the data being collected here and that some data requested may be collected by another agency or entity other than the Lead Agency. Each State/Territory's policy context and priorities and standards will play a role in the way that quality improvement activities are developed and implemented. For example, the number of programs with licensing violations will be

affected by how stringent the licensing standards are. States with more stringent standards may be more likely to report more violations than those with less stringent licensing standards. OCC intends to work with the States/Territories to gather any additional contextual information necessary in order to fully understand the context of these data for any reporting activities involving this information.

A1.2.1 Number of Programs

- a) How many licensed center-based programs operated in the State/Territory as of September 30, 2014? _____
☐ N/A
Describe: _____
- b) How many licensed home-based programs operated in the State/Territory as of September 30, 2014? _____
☐ N/A
Describe: _____
- c) Does the State/Territory have data on the number of programs operating in the State/Territory that are legally exempt from licensing? At a minimum, the Lead Agency should provide the number of legally exempt providers serving children receiving CCDF.
- ☐ Yes. If yes, include the number of programs as of September 30, 2014 and describe _____ (Use the Describe Box to provide the universe of programs on which the number is based)
- ☐ No. Describe: _____

A1.2.2 Number and Frequency of Monitoring Visits

For licensed programs, a monitoring visit is an onsite visit by department personnel to a licensed child care program with the goal of ensuring compliance with licensing regulations. This may include initial licensing determination visits, licensing renewal visits, periodic announced or unannounced visits, and visits made after a complaint is lodged. For legally exempt providers, a monitoring visit is an onsite visit to a child care program with the goal of ensuring compliance with health and safety standards as defined by CCDF and required for receipt of CCDF funds. Use the Describe box to provide your State/Territory monitoring visit requirement.

- a) How many licensed center-based programs received at least one monitoring visit between October 1, 2013 and September 30, 2014?

- a-1) Of those programs visited, how many were unannounced? _____
- a-2) Of those programs visited, how many were triggered by a complaint or identified risk? _____
- a-3) What percentage of required visits for licensed center-based program were completed? _____
- ☐ N/A
Describe: _____

b) How many licensed family child care programs received at least one monitoring visit between October 1, 2013 and September 30, 2014?

b-1) Of those programs visited, how many were unannounced? _____

b-2) Of those programs visited, how many were triggered by a complaint or identified risk? _____

b-3) What percentage of required visits for licensed family child care programs were completed? _____

☐ N/A

Describe: _____

c) How many legally exempt providers receiving CCDF received at least one monitoring visit between October 1, 2013 and September 30, 2014? Of those,

c-1) Of those programs visited, how many were unannounced? _____

c-2) Of those programs visited, how many were triggered by a complaint or identified risk? _____

c-3) What percentage of required visits for legally exempt providers were completed? _____

☐ N/A

Describe: _____

A1.2.3 Number of Licensing Suspensions, Licensing Revocations and Terminations from CCDF

Suspension of license includes any enforcement action that requires the temporary suspension of child care services because of licensing violations. Revocation of license includes termination or non-renewal of licensure and any other enforcement action that requires the closure of a program because of licensing violations.

| | How many programs had their licenses suspended due to licensing violations as defined in your State/Territory during the last fiscal year? | How many programs had their licenses revoked due to licensing violations as defined in your State/Territory during the last fiscal year? | How many programs were terminated from participation in CCDF due to failure to meet licensing or minimum CCDF health and safety requirements during the last fiscal year? | N/A | Describe |
|-------------------------------|--|--|---|--------------------------|----------|
| Child Care Centers | _____ | _____ | _____ | <input type="checkbox"/> | _____ |
| Group Child Care Homes | _____ | _____ | _____ | <input type="checkbox"/> | _____ |

| | How many programs had their licenses suspended due to licensing violations as defined in your State/Territory during the last fiscal year? | How many programs had their licenses revoked due to licensing violations as defined in your State/Territory during the last fiscal year? | How many programs were terminated from participation in CCDF due to failure to meet licensing or minimum CCDF health and safety requirements during the last fiscal year? | N/A | Describe |
|--------------------------------|--|--|---|--------------------------|----------------------|
| Family Child Care Homes | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="checkbox"/> | <input type="text"/> |
| In-Home Providers | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="checkbox"/> | <input type="text"/> |

A1.2.5 How many previously license-exempt providers were brought under the licensing system during the last fiscal year? _____

☐ N/A

Describe:

A1.2.6 How many injuries as defined by the State/Territory occurred in child care during the last year?

Please provide your definition of injuries in the Describe box and indicate the universe of programs on which the number is based (e.g., licensed providers, CCDF providers, or all providers). _____

☐ N/A

Describe:

A1.2.7 How many fatalities occurred in child care or as the result of a child care accident or injury as of the end of the last year?

Please indicate the universe of programs on which the number is based (e.g., licensed providers, CCDF providers, or all providers). _____

☐ N/A

Describe:

Establishing Early Learning Guidelines (Component #2)

A2.1 Progress on Overall Goals

A2.1.1 Did the State/Territory make any changes to its voluntary early learning guidelines (including guidelines for school-age children) as reported in 3.2 during the last fiscal year?

☐ Yes. Describe _____

☐ No

A2.1.2 Based on the goals described in the Lead Agency's CCDF Plan at Section 3.2.8, please report your progress.

You may include any significant areas of progress that that were not anticipated in the Plan, as well. For each goal listed, briefly describe the improvement with specific examples or numeric targets where possible (e.g., Expanded the number of programs trained on using the ELG's, Aligned the ELG's with Head Start Child Development and Early Learning Framework). If applicable, describe any barriers to implementing your planned goals.

| Goals Described in FY 2014-2015 CCDF Plan | Describe Progress – Include Examples and Numeric Targets where Possible |
|---|---|
| | |
| | |

A2.2 Key Data

OCC is collecting this information as one part of our overall effort to better understanding State/Territory activities to improve the quality of child care. OCC recognizes that the data requested in this report will only provide part of that picture because there are many factors which affect the data being collected here. Each State/Territory's policy context and priorities and standards will play a role in the way that quality improvement activities are developed and implemented. OCC intends to work with the States/Territories to gather any additional contextual information necessary in order to fully understand the context of these data for any reporting activities involving this information.

A2.2.1a How many individuals were trained on early learning guidelines (ELG's) or standards over the last fiscal year?

Responses to this question should be consistent with information provided in question 3.2.3 in the CCDF Plan.

| Provider Categories | Birth to Three ELG's | Three-to-Five ELG's | Five and Older ELG's | N/A | Describe |
|--|----------------------|---------------------|----------------------|--------------------------|----------|
| How many teachers/practitioners in center-based programs were trained on ELG's over the past year? Separate by age group if possible (e.g., infants and toddlers, preschoolers, school-age children) | _____ | _____ | _____ | <input type="checkbox"/> | _____ |

| Provider Categories | Birth to Three ELG's | Three-to-Five ELG's | Five and Older ELG's | N/A | Describe |
|--|-----------------------------|----------------------------|-----------------------------|--------------------------|-----------------|
| How many family child care providers were trained on ELG's over the past year? Separate by age group if possible (e.g., infants and toddlers, preschoolers, school-age children) | _____ | _____ | _____ | <input type="checkbox"/> | _____ |
| How many legally exempt providers were trained on ELG's over the past year? Separate by age group if possible (e.g., infants and toddlers, preschoolers, school-age children) | _____ | _____ | _____ | <input type="checkbox"/> | _____ |

A2.2.1b How many children are served in programs implementing the ELG's?

Refer to question 3.2.4 in the CCDF Plan for examples of how ELG's can be implemented in programs. Program capacity can be used as an estimate of children served.

| Provider Categories | Birth to Three ELG's | Three-to-Five ELG's | Five and Older ELG's | N/A | Describe |
|---|-----------------------------|----------------------------|-----------------------------|--------------------------|-----------------|
| How many children are served in center-based programs implementing the ELG's? Separate by age group if possible (e.g., infants and toddlers, preschoolers, school-age children) | _____ | _____ | _____ | <input type="checkbox"/> | _____ |
| How many children are served in family child care program implementing the ELG's? Separate by age group if possible (e.g., infants and toddlers, preschoolers, school-age children) | _____ _____ | _____ _____ | _____ _____ | <input type="checkbox"/> | _____ |
| How many children are served in legally exempt programs implementing the ELG's? Separate by age group if possible (e.g., infants and toddlers, preschoolers, school- | _____ _____ | _____ _____ | _____ _____ | <input type="checkbox"/> | _____ |

| Provider Categories | Birth to Three ELG's | Three-to-Five ELG's | Five and Older ELG's | N/A | Describe |
|---------------------|----------------------|---------------------|----------------------|-----|----------|
| age children) | | | | | |

Pathways to Excellence for Child Care Programs through Program Quality Improvement Activities (Component #3)

A3.1 Progress on Overall Goals

A3.1.1 Based on the goals described in the Lead Agency's CCDF Plan at Section 3.3.9, please report your progress.

You may include any significant areas of progress that that were not anticipated in the Plan, as well. For each goal listed, briefly describe the improvement with specific examples or numeric targets where possible (e.g., Expanded the number of programs included in the QRIS, Aligned the QRIS standards with Head Start performance standards, or expanded the number of programs with access to an on-site quality consultant). If applicable, describe any barriers to implementing your planned goals.

| Goals Described in FY 2014-2015 CCDF Plan | Describe Progress – Include Examples and Numeric Targets where Possible |
|---|---|
| | |
| | |

A3.2 Key Data

OCC is collecting this information as one part of our overall effort to better understanding State/Territory activities to improve the quality of child care. OCC recognizes that the data requested in this report will only provide part of that picture because there are many factors which affect the data being collected here. Each State/Territory's policy context and priorities and standards will play a role in the way that quality improvement activities are developed and implemented. OCC intends to work with the States/Territories to gather any additional contextual information necessary in order to fully understand the context of these data for any reporting activities involving this information.

A3.2.1 Number of Program Receiving Targeted Technical Assistance

Targeted technical assistance is technical assistance (coaching, mentoring and consultation) that is designed to address a particular domain/area of quality. Responses in this section should be consistent with responses provided in question 3.3.2 in the CCDF Plan which focuses on targeted technical assistance to programs

(rather than practitioners) that is intended for moving programs to higher levels of quality.

- a) How many programs received targeted technical assistance during the last fiscal year (October 1, 2013 through September 30, 2014)?

☐ N/A

Describe:

- b) If possible, report the number of programs who received targeted technical assistance in the following areas:

Health and safety

Infant and toddler care

School-age care

Inclusion

Teaching dual language learners

Understanding developmental screenings and/or observational assessment tools for program improvement purposes

Mental health

Business management practices

☐ N/A

Describe:

A3.2.2 Number of Programs Receiving Financial Supports

Responses to this question should be consistent with responses provided in question 3.3.3 of the CCDF Plan. **Financial supports** must be intended to reward, improve, or sustain quality. They can include grants, cash, reimbursements, gift cards, or purchases made to benefit a program. This includes tiered reimbursements for CCDF subsidies. **One-time grants, awards, or bonuses** include any kind of financial support that a program can receive only once. **On-going or periodic quality stipends** include any kind of financial support intended to reward, improve, or sustain quality that a program can receive more than once.

- a) How many programs received one-time, grants, awards or bonuses?

Child Care Centers

☐ N/A

Describe:

Family Child Care Homes

☐ N/A

Describe:

- b) How many programs received on-going or periodic quality stipends?

Child Care Centers

☐ N/A

Describe:

Family Child Care Homes

☐ N/A

Describe:

A3.2.3 Number of Eligible Programs for State/Territory QRIS or Other Quality Improvement System

- a) What is the total number of eligible child care centers for QRIS _____ OR Other Quality Improvement System? _____
☐ N/A
Describe: _____
- b) What is the total number of eligible family child care homes for QRIS _____ OR Other Quality Improvement System? _____
☐ N/A
Describe: _____
- c) What is the total number of eligible license-exempt providers for QRIS _____ OR Other Quality Improvement System? _____
☐ N/A
Describe: _____

A3.2.4 Number and Percentage of Programs Participating in State/Territory QRIS or Other Quality Improvement System

- a) Of the total number eligible as reported in A3.2.3, what is the total number and percentage of child care center programs in the State/Territory that participate in the State/Territory QRIS or other quality improvement system for programs over the last fiscal year?
- Number of Child Care Centers Participating in QRIS _____ OR Other Quality Improvement System _____
- Percentage of Child Care Centers Participating in QRIS _____ OR Other Quality Improvement System _____
☐ N/A
Describe: _____
- b) Of the total number eligible as reported in A3.2.3, what is the total number and percentage of family child care programs in the State/Territory that participate in the State/Territory QRIS or other quality improvement system for programs over the last fiscal year?
- Number of Family Child Care Homes QRIS _____ OR Other Quality Improvement System _____
- Percentage of Family Child Care Homes QRIS _____ OR Other Quality Improvement System _____
☐ N/A
Describe: _____
- c) Of the total number eligible as reported in A3.2.3, what is the total number and percentage of license-exempt programs in the State/Territory that

participate in the State/Territory QRIS or other quality improvement system for programs over the last fiscal year?

Number of License-Exempt Providers QRIS _____ OR Other Quality Improvement System _____

Percentage of License-Exempt Providers QRIS _____ OR Other Quality Improvement System _____

☐ N/A

Describe: _____

A3.2.5. Number of Programs at Each Level of Quality

For each type of care, provide the total number of quality levels and the number of programs at that level of the total number of participating as reported in A3.2.4. Describe metric if other than QRIS, such as accreditation.

| | Number of levels of quality | Number of programs at each level | N/A | Describe |
|--------------------------|-----------------------------|----------------------------------|--------------------------|----------|
| Child Care Centers | _____ | _____ | <input type="checkbox"/> | _____ |
| Family Child Care Homes | _____ | _____ | <input type="checkbox"/> | _____ |
| License-Exempt Providers | _____ | _____ | <input type="checkbox"/> | _____ |

A3.2.6 Number of Programs Who Moved Up or Down within QRIS

If quality threshold is something other than QRIS, describe the metric used, such as accreditation. These numbers ARE NOT expected to total the number of participating programs in the QRIS as reported in A3.2.4.

| | How many programs moved up within the QRIS or achieved another quality threshold established by the State/Territory over the last fiscal year? | How many programs moved down within the QRIS or achieved another quality threshold established by the State/Territory over the last fiscal year? | N/A | Describe |
|--------------------------|--|--|--------------------------|----------|
| Child Care Centers | _____ | _____ | <input type="checkbox"/> | _____ |
| Family Child Care Homes | _____ | _____ | <input type="checkbox"/> | _____ |
| License-Exempt Providers | _____ | _____ | <input type="checkbox"/> | _____ |

A3.2.7 Number of CCDF Subsidized Children Served in Programs Participating in the State/Territory Quality Improvement System

Note. If the State/Territory does not have a formal QRIS, the State/Territory may define another quality indicator and report it here.

- a) What percentage of CCDF children were served in participating programs during the last fiscal year? _____
- b) What percentage of CCDF children were served in high quality care as defined by the State/Territory? _____ Provide the definition of high quality care in the Describe box. This may include assessment scores, accreditation, or other metric, if no QRIS.

☐ N/A

Describe:

Pathways to Excellence for the Child Care Workforce: Professional Development Systems and Workforce Initiatives (Component #4)

A4.1 Progress on Overall Goals

A4.1.1 Based on the goals described in the Lead Agency's CCDF Plan at Section 3.4.7, please report your progress.

You may include any significant areas of progress that that were not anticipated in the Plan, as well. For each goal listed, briefly describe the improvement with specific examples or numeric targets where possible (e.g., Implement a wage supplement program, Develop articulation agreements). If applicable, describe any barriers to implementing your planned goals.

| Goals Described in FY 2014-2015 CCDF Plan | Describe Progress – Include Examples and Numeric Targets where Possible |
|--|--|
| | |
| | |

A4.2 Key Data

OCC is collecting this information as one part of our overall effort to better understanding State/Territory activities to improve the quality of child care. OCC recognizes that the data requested in this report will only provide part of that picture because there are many factors which affect the data being collected here. Each State/Territory's policy context and priorities and standards will play a role in the way that quality improvement activities are developed and implemented. OCC intends to work with the States/Territories to gather any additional contextual

information necessary in order to fully understand the context of these data for any reporting activities involving this information.

A4.2.1 Number of Teachers/Caregivers and Qualification Levels

- a) What is the total number of child care center teachers in the State/Territory as of September 30, 2014? _____
☐ N/A
 Describe: _____
- b) What is the total number of family child care providers in the State/Territory as of September 30, 2014? _____
☐ N/A
 Describe: _____
- c) What is the number of center teachers and family child care providers by qualification level as of the end of the last fiscal year? Count only the highest level of education attained.

| | Child Care Center Teachers | Family Child Care Providers | N/A | Describe |
|-----------------------------------|----------------------------|-----------------------------|--------------------------|----------|
| Child Development Associate (CDA) | _____ | _____ | <input type="checkbox"/> | _____ |
| State/Territory Credential | _____ | _____ | <input type="checkbox"/> | _____ |
| Associate's degree | _____ | _____ | <input type="checkbox"/> | _____ |
| Bachelor's degree | _____ | _____ | <input type="checkbox"/> | _____ |
| Graduate/Advanced degree | _____ | _____ | <input type="checkbox"/> | _____ |

A4.2.2 Number of Individuals Included in State/Territory's Professional Development Registry during Last Fiscal Year (October 1, 2013 through September 30, 2014)

Teachers in child care centers _____
 Family child care home providers _____
 License-exempt providers _____
☐ N/A
 Describe: _____

A4.2.3 Number of Individuals Receiving Credit-Based Training and/or Education as defined by State/Territory during the last fiscal year

Teachers in child care centers _____
 Family child care home providers _____
 License-exempt providers _____
☐ N/A
 Describe: _____

A4.2.4 Number of Credentials and Degrees Awarded during Last Fiscal Year

If possible, list the type of credential or degree and in what type of setting the practitioner worked.

| Setting | List Type of Credential and Provide Number Awarded | List Type of Degree and Provide Number Awarded | N/A | Describe |
|----------------------------------|--|--|--------------------------|----------|
| Teachers in child care centers | _____ | _____ | <input type="checkbox"/> | _____ |
| Family child care home providers | _____ | _____ | <input type="checkbox"/> | _____ |
| License-exempt providers | _____ | _____ | <input type="checkbox"/> | _____ |

A4.2.5 Number of Individuals Receiving Technical Assistance during Last Fiscal Year

Describe any data you track on coaching, mentoring, or other specialist consultation. If possible, include in what type of setting the practitioner worked. Responses to this question should be consistent with information provided in question 3.4.4e of the CCDF Plan.

| Setting | List Type of Technical Assistance and Provide Number | N/A | Describe |
|----------------------------------|--|--------------------------|----------|
| Teachers in child care centers | _____ | <input type="checkbox"/> | _____ |
| Family child care home providers | _____ | <input type="checkbox"/> | _____ |
| License-exempt providers | _____ | <input type="checkbox"/> | _____ |

A4.2.6 Type of Financial Supports Provided and Number of Teachers/Providers Receiving as of End of Last Fiscal Year?

- ☐ Scholarships. How many teachers/providers received? _____
- ☐ Reimbursement for Training Expenses. How many teachers/providers received? _____
- ☐ Loans. How many teachers/providers received? _____
- ☐ Wage supplements. How many teachers/providers received? _____
- ☐ Other. Describe
- ☐ N/A
- Describe:

Building Subsidy Systems that Increase Access to High Quality Care

In this section, Lead Agencies provide progress on their subsidy administration goals over the past year as of September 30, 2014.

A5.1 Progress on Overall Goals

Based on the goals described in the Lead Agency's CCDF Plan at Section 2.8, please report your progress using the chart below. You may include any significant areas of progress that were not anticipated in the Plan, as well. For each goal listed, briefly describe the improvement with specific examples or numeric targets where possible (e.g., established copayment policies that sustain income and sustain quality, or established eligibility policies that promote continuity of care). If applicable, describe any barriers to implementing your planned goals.

| Goals Described in FY 2014-2015 CCDF Plan | Describe Progress – Include Examples and Numeric Targets where Possible |
|--|--|
| | |
| | |

| |
|--|
| <p style="text-align: center;">APPENDIX 2 CCDF PROGRAM ASSURANCES AND CERTIFICATIONS</p> |
|--|

The Lead Agency, named in Part 1 of this Plan, assures (§98.15) that:

- (1) upon approval, it will have in effect a program that complies with the provisions of the Plan printed herein, and is administered in accordance with the Child Care and Development Block Grant Act of 1990 as amended, Section 418 of the Social Security Act, and all other applicable Federal laws and regulations. (658D(b), 658E(a))
- (2) the parent(s) of each eligible child within the State who receives or is offered child care services for which financial assistance is provided is given the option either to enroll such child with a child care provider that has a grant or contract for the provision of the service; or to receive a child care certificate. (658E(c)(2)(A)(i))
- (3) in cases in which the parent(s) elects to enroll the child with a provider that has a grant or contract with the Lead Agency, the child will be enrolled with the eligible provider selected by the parent to the maximum extent practicable. (658E(c)(2)(A)(ii))
- (4) the child care certificate offered to parents shall be of a value commensurate with the subsidy value of child care services provided under a grant or contract. (658E(c)(2)(A)(iii))
- (5) with respect to State and local regulatory requirements, health and safety requirements, payment rates, and registration requirements, State or local rules, procedures or other requirements promulgated for the purpose of the Child Care and Development Fund will not significantly restrict parental choice among categories of care or types of providers. (658E(c)(2)(A), §98.15(p), §98.30(g), §98.40(b)(2), §98.41(b), §98.43(c), §98.45(d))
- (6) that children receiving services under the CCDF are age-appropriately immunized, and that the health and safety provisions regarding immunizations incorporate (by reference or otherwise) the latest recommendation for childhood immunizations of the State public health agency. (§98.41(a)(1))
- (7) that CCDF Discretionary funds are used to supplement, not supplant, State general revenue funds for child care assistance for low-income families. (P.L. 109-149)

The Lead Agency also certifies that:

- (1) it has procedures in place to ensure that providers of child care services for which assistance is provided under the Child Care and Development Fund afford parents unlimited access to their children and to the providers caring for their children during the normal hours of operations and whenever such children are in the care of such providers. (658E(c)(2)(B))

- (2) it maintains a record of substantiated parental complaints and makes information regarding such complaints available to the public on request. (658E(c)(2)(C))
- (3) it will collect and disseminate to parents of eligible children and the general public consumer education information that will promote informed child care choices. (658E(c)(2)(D))
- (4) it has in effect licensing requirements applicable to child care services provided in the State. (658E(c)(2)(E))
- (5) there are in effect within the State (or other area served by the Lead Agency), under State or local law, requirements designed to protect the health and safety of children; these requirements are applicable to child care providers that provide services for which assistance is made available under the Child Care and Development Fund. (658E(c)(2)(E))
- (6) procedures are in effect to ensure that child care providers of services for which assistance is provided under the Child Care and Development Fund comply with all applicable State or local health and safety requirements. (658E(c)(2)(G))
- (7) payment rates under the Child Care and Development Fund for the provision of child care services are sufficient to ensure equal access for eligible children to comparable child care services in the State or sub-State area that are provided to children whose parents are not eligible to receive assistance under this program or under any other Federal or State child care assistance programs. (658E(c)(4)(A))

CCDF Regulations 45 CFR §98.13(b)(2)-(6) require the following certifications.

1. [Assurance of compliance with Title VI of the Civil Rights Act of 1964](#)
2. [Certification regarding debarment](#)
3. [Definitions for use with certification of debarment](#)
4. [HHS certification regarding drug-free workplace requirements](#)
5. [Certification of Compliance with the Pro-Children Act of 1994](#)
6. [Certification regarding lobbying](#)

These certifications were obtained in the 1997 Plan and need not be collected again if there has been no change in Lead Agency. If there has been a change in Lead Agency, these certifications must be completed and submitted with the Plan.



Child Care and Development Fund (CCDF) Plan

For

State/Territory: Mississippi

FFY 2014-2015

This Plan describes the CCDF program to be administered by the State/Territory for the period 10/1/2013 – 9/30/2015. As provided for in the applicable statutes and regulations, the Lead Agency has the flexibility to modify this program at any time, including amending the options selected or described.

For purposes of simplicity and clarity, the specific provisions printed herein of applicable laws and regulations are sometimes paraphrases of, or excerpts and incomplete quotations from, the full text. The Lead Agency acknowledges its responsibility to adhere to them regardless of these modifications.

Public reporting burden for this collection of information is estimated to average 162.5 hours per response, including the time for reviewing instructions, gathering and maintaining the data needed, and reviewing the collection of information.

An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number.

Form ACF-118 Approved OMB Number 0970-0114 expires 05/31/2016

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Amendments Log

Appendix 1: Quality Performance Report

Appendix 2: CCDF Program Assurances and Certifications

PART 1

ADMINISTRATION

This section provides information on how the CCDF program is administered, including the designated Lead Agency, funding information, the administrative structure, program integrity and accountability policies and strategies, coordination efforts, and emergency preparedness plans and procedures.

1.1 Contact Information

The agency shown below has been designated by the Chief Executive Officer of the State (or Territory), to represent the State (or Territory) as the Lead Agency. The Lead Agency agrees to administer the program in accordance with applicable Federal laws and regulations and the provisions of this Plan, including the assurances and certifications appended hereto. (658D, 658E)

1.1.1 Who is the Lead Agency designated to administer the CCDF program?

Identify the Lead Agency and Lead Agency's Chief Executive Officer designated by the State/Territory. ACF will send official grant correspondence such as grant awards, grant adjustments, Plan approvals and disallowance notifications to the designated contact identified here. (658D(a), §98.10)

Name of Lead Agency: [Mississippi Department of Human Services](#)
Address of Lead Agency: [750 North State Street, Jackson, Mississippi 39202](#)
Name and Title of the Lead Agency's Chief Executive Officer: [Mr. Richard Berry, Executive Director](#)
Phone Number: [601-359-4480](#)
Fax Number: [601-359-4910](#)
E-Mail Address: Richard.Berry@mdhs.ms.gov
Web Address for Lead Agency (if any): www.MDHS.ms.gov

1.1.2. Who is the CCDF administrator?

Identify the CCDF administrator designated by the Lead Agency, the day-to-day contact, with responsibility for administering the State/Territory's CCDF program. ACF will send programmatic communications such as program announcements, program instructions, and data collection instructions to the designated contact identified here. **If there is more than one designated contact with equal or shared responsibility for administering the CCDF program, please identify the co-administrator or entity with administrative responsibilities and include contact information. (§§98.16(a) and (c)(1))**

a) Contact Information for CCDF Administrator:

Name of CCDF Administrator: [Jill Dent](#)
Title of CCDF Administrator: [Director, MDHS Division of Early Childhood Care & Development](#)

Address of CCDF Administrator: [750 North State Street, Jackson, Mississippi 39202](#)
Phone Number: [601-359-4555](#)
Fax Number: [601-359-4422](#)
E-Mail Address: Jill.Dent@mdhs.ms.gov
Phone Number for CCDF program information (for the public) (if any):
[1-800-877-7882](#)
Web Address for CCDF program (for the public) (if any):
www.childcareinfo.ms
Web address for CCDF program policy manual: (if any):
www.childcareinfo.ms
Web address for CCDF program administrative rules: (if any):
www.childcareinfo.ms

b) Contact Information for CCDF Co-Administrator (if applicable):

Name of CCDF Co-Administrator: NA
Title of CCDF Co-Administrator: _____
Address of CCDF Co-Administrator: _____
Phone Number: _____
Fax Number: _____
E-Mail Address: _____
Description of the role of the Co-Administrator: _____

1.2 Estimated Funding

1.2.1. What is your expected level of funding for the first year of the FY 2014 – FY 2015 plan period?

The Lead Agency estimates that the following amounts will be available for child care services and related activities during the 1-year period from October 1, 2013 through September 30, 2014. (§98.13(a)).

FY 2014 Federal CCDF allocation (Discretionary, Mandatory and Matching):
[\\$55,376,741 \(estimate includes Targeted Funds\)](#)
Federal TANF Transfer to CCDF: [\\$Amount pending budget allocation](#)
Direct Federal TANF Spending on Child Care: [\\$0.00](#)
State CCDF Maintenance-of-Effort Funds: [\\$1,715,430](#)
State Matching Funds: [\\$5,467,153](#)

Reminder – Lead Agencies are reminded that not more than 5 percent of the aggregate CCDF funds, including federal funds and required State Matching funds, shall be expended on administration costs (§98.52) once all FY2014 funds have been liquidated. State Maintenance-of-Effort funds are not subject to this limitation.

1.2.2. Which of the following funds does the Lead Agency intend to use to meet the CCDF Matching and maintenance-of-effort (MOE) requirements described in 98.53(e) and 98.53(h)?

Check all that apply. Territories not required to meet CCDF Matching and MOE requirements should mark ☐ N/A here.

Note: The Lead Agency must check at least public and/or private funds as matching, even if pre-kindergarten (pre-k) funds also will be used.

☒ Public funds to meet the CCDF Matching Fund requirement. Public funds may include any general revenue funds, county or other local public funds, State/Territory-specific funds (tobacco tax, lottery), or any other public funds.

If checked, identify source of funds: [State General Fund and fees/funds collected by the Mississippi Department of Health for licensing and regulatory infractions. These funds collected consist of license application and renewal fees.](#)

If known, identify the estimated amount of public funds the Lead Agency will receive: [\\$7.6 M](#)

☒ Private donated funds to meet the CCDF Matching Funds requirement. Only private funds received by the designated entities or by the Lead Agency may be counted for match purposes. (98.53(f))

If checked, are those funds:

☐ donated directly to the State?

☒ donated to a separate entity(ies) designated to receive private donated funds?

If checked, identify the number of entities designated to receive private donated funds and provide name, address, contact, and type

[Children's Defense Fund
Southern Regional Office Headquarters
2659 Livingston Road, Suite 200
Jackson, MS 39213
Director, Oleta Fitzgerald
601-321-1966
OFitzgerald@childrensdefense.org
Non-profit Agency](#)

If known, identify the estimated amount of private donated funds the Lead Agency will receive: \$ [Exact figure depends on availability of funds, if utilized to draw down additional federal funding.](#)

☐ State expenditures for pre-k programs to meet the CCDF Matching Funds requirement. If checked,

Provide the estimated percentage of Matching Fund requirement that will be met with pre-k expenditures (not to exceed 30%): _____

If percentage is more than 10% of the Matching fund requirement, describe how the State will coordinate its pre-k and child care services: _____

If known, identify the estimated amount of pre-k funds the Lead Agency will receive for Matching Funds requirement: \$ _____

Describe the Lead Agency efforts to ensure that pre-k programs meet the needs of working parents: _____

☐ State expenditures for pre-k programs to meet the CCDF Maintenance of Effort (MOE) requirements. If checked,

☐ The Lead Agency assures that its level of effort in full-day/full-year child care services has not been reduced, pursuant to 98.53(h)(1). Estimated percentage of MOE Fund requirement that will be met with pre-k expenditures (not to exceed 20%): _____

If percentage is more than 10% of the MOE requirement, describe how the State will coordinate its pre-k and child care services to expand the availability of child care: _____

If known, identify the estimated amount of pre-k funds the Lead Agency will receive for MOE Fund requirement: \$_____

Describe the Lead Agency efforts to ensure that pre-k programs meet the needs of working parents: _____

1.2.3 Describe the activities for which quality funds (including targeted quality funds for infants and toddlers, school-age children, and resource and referral) will be used in FY 2014 - 2015. Note: Funding estimate is limited to FY 2014. In as much detail possible, list the activities that will be funded, the estimated amount of CCDF quality funds that will be used for each activity, and how these activities relate to the Lead Agency's overall goal of improving the quality of child care for low-income children.

| Estimated Amount of CCDF Quality Funds For FY 2014 | Activity (Lead Agency should include description of quality activities that cover FY 2014 and also information about activities for FY 2015, if available) | Purpose | Projected Impact and Anticipated Results (if possible) |
|--|--|---------|--|
| | | | |

| Estimated Amount of CCDF Quality Funds For FY 2014 | Activity (Lead Agency should include description of quality activities that cover FY 2014 and also information about activities for FY 2015, if available) | Purpose | Projected Impact and Anticipated Results (if possible) |
|---|---|--|--|
| Infant/Toddler Targeted Funds <u>\$1,500,000</u> | Activities funded with Infant/Toddler Targeted funds include A) the provision of child care at job centers for parents seeking employment; B) a portion of child care licensure activities; C) on-site training and technical assistance to unlicensed family child care providers; and D) a pilot QRIS program for unlicensed family child care providers. | A) This program provides child care services for individuals engaged in job search activities at a local WIN Job Center. B) A portion of the Division of Child Care Licensure, MS Department of Health is funded with these targeted funds C) This program provides educational training and technical assistance to unlicensed in-home and family daycare childcare providers that offer fullday, full-year child care services to eligible families. D) This program assesses the level of quality of participating unlicensed family child care homes. | A) The Lead Agency anticipates that this program will support parents in gaining employment, thereby increasing family stability and self-sufficiency. B) The Lead Agency anticipates that the application of rules and regulations governing child care centers will support the provision of safe care environments for all children enrolled. C) The Lead Agency anticipates that this program will result in higher quality care in unlicensed family child care homes. D) The Lead Agency anticipates that this program will evaluate the level of care offered in unlicensed family child care homes, and support increases in program quality. |

| Estimated Amount of CCDF Quality Funds For FY 2014 | Activity (Lead Agency should include description of quality activities that cover FY 2014 and also information about activities for FY 2015, if available) | Purpose | Projected Impact and Anticipated Results (if possible) |
|--|--|--|--|
| School-Age/Child Care Resource and Referral Targeted Funds <u>\$273,000</u> | Activities funded with School Age Targeted Funds include a pilot Out-of-school QRIS program. | This program assesses the level of quality of participating programs serving school-aged children. | The Lead Agency anticipates that this program will evaluate the level of care offered in programs serving school-aged children, and support increases in program quality. |
| Quality Expansion Targeted Funds <u>\$2,600,000</u> | Activities funded with Quality Expansion Targeted Funds include A) on-site training and technical assistance; and B) project-based programming for school-aged children. | A) These programs offer on-site training and technical assistance to all staff in licensed childcare centers in the areas of classroom/instructional quality, nutrition & physical activity, administration and leadership skills. B) This program offers quality programming for school-aged children with a community-based approach. | A) The Lead Agency anticipates that these programs will support lasting changes leading to adoption of best practices and increased quality of care. B) The Lead Agency anticipates that this program will offer a rich educational program that expands children's knowledge and increases their skills in a variety of areas. |

| Estimated Amount of CCDF Quality Funds For FY 2014 | Activity (Lead Agency should include description of quality activities that cover FY 2014 and also information about activities for FY 2015, if available) | Purpose | Projected Impact and Anticipated Results (if possible) |
|---|---|--|--|
| <u>Quality Funds (not including Targeted Funds)</u> | Activities funded with Quality Funds include A) professional development; B) training and technical assistance for children with special needs; and C)) a portion of child care licensure activities. | A) These programs offer professional development opportunities for child care program staff and directors including CDA and other professional credentials and professional conferences. B) This program offers training and technical assistance, including a professional credential for child care staff regarding inclusion of children with special needs. C) A portion of the Division of Child Care Licensure, MS Department of Health is funded with these targeted funds. | A) The Lead Agency anticipates that these programs will increase the educational level of child care staff, and overall professional development. In addition, a series of professional development conferences designed to support continued education. B) The Lead Agency anticipates that this program will increase competency of child care providers in addressing the needs of children with special needs. C) The Lead Agency anticipates that the application of rules and regulations governing child care centers will support the provision of safe care environments for all children enrolled. |

1.2.4 Will the Lead Agency distribute quality funds to counties or local entities?

Note: This question is to obtain information on whether the Lead Agency retains decision making responsibilities regarding the quality dollars at the State/Territory level or if funds are distributed to local entities.

Does the State maintain decisions at the State level, or are funds distributed to locals that have some decisions on how funds are spent.

- ☒ No, the Lead Agency will not distribute any quality funds directly to local entities
- ☐ Yes, all quality funds will be distributed to local entities
- ☐ Yes, the Lead Agency will distribute a portion of quality funds directly to local entities. Estimated amount or percentage to be distributed to localities _____

☒ Other. Describe. The Lead Agency does have slot contractors in place that receive subsidy funds in reimbursement of care provided as a function of their contract.

1.3. CCDF Program Integrity and Accountability

Program integrity is defined to include efforts that ensure effective internal controls over the administration of CCDF funds. The Lead Agency is responsible for monitoring programs and services, ensuring compliance with the rules of the program, promulgating rules and regulations to govern the overall administration of the plan and oversee the expenditure of funds by sub-grantees and contractors. (§ 98.11(b)) Accountability measures should address administrative error, which includes unintentional agency error, **as well as address** program violations, both unintentional and intentional, that may or may not result in further action by the Lead Agency, including those cases suspected of and/or prosecuted for fraud.

1.3.1. Describe the strategies the Lead Agency will utilize to ensure effective internal controls are in place.

The **description** of internal controls may include, but is not limited to a description of processes to ensure sound fiscal management, to identify areas of risk or to establish regular evaluation of control activities.

Over the last four years, the Lead Agency has been dedicated to reducing errors in reporting, administrative processes, and payment for services. Strategies adopted under this plan will reflect a continuation of this ongoing effort. Strategies identified to ensure effective internal controls include, but are not limited to:

1. Developing Case Review Assessment tool for use in monitoring case files.
2. Conducting quarterly reviews of case files using the Case Review Assessment to ensure accuracy in adherence to administrative policies.
3. Holding targeted staff training to address errors identified by the Case Review Assessment process.

4. Conducting quarterly reviews of cases for Improper Payment Review.
5. Utilizing reports from CCIS to monitor program activity including additions, terminations, expenditures, and obligations.
6. Monthly training offered to staff on policies and procedures.
7. Continued use of electronic systems to calculate face values for authorizations and payments to providers.

The State's Office of the State Auditor engages all divisions of the Mississippi Department of Human Services in ongoing audits. These audits include reviews of casefiles to ensure proper expenditure of funds. Upon completion of an audit, a meeting is held to discuss findings and plan to address any weaknesses in program operation before initiating the next audit.

1.3.2 Describe the processes the Lead Agency will use to monitor all sub-recipients.

Lead Agencies that use other governmental or non-governmental sub-recipients to administer the program must have written agreements in place outlining roles and responsibilities for meeting CCDF requirements (98.11 (a) (3))

Definition: A sub-recipient (including a sub-contractor and or sub-grantee) is a non-Federal entity that expends Federal awards (contract or grant) received from another entity to carry out a Federal program, but does not include a vendor nor does it include an individual who is a beneficiary of such a program. [OMB Circular A-133](#) Section 210 provides additional information on the characteristics of a **sub-recipient** and **vendor**.

The description of monitoring may include, but is not limited to, a discussion of written agreements, fiscal management, review of policies and procedures to ensure compliance with CCDF regulations, monitoring/auditing contractors or grantees to ensure that eligible children are served and eligibility documentation is verified, and establishing performance indicators or measures related to improper payments.

| The Lead Agency has in place subcontracts with various entities to provide child care slots. These subcontractors are monitored by the Mississippi Department of Human Services Division of Program Integrity in accordance with the regulations established for all entities engaged in contract services for the Lead Agency. These regulations can be found in the MDHS Subgrant/Contract Manual located at, http://www.mdhs.state.ms.us/pdfs/dpimanual/dpi_submanual.pdf.

Annual monitoring of subcontractors by the MDHS Division of Program Integrity includes a review of eligibility processes and requests for payment to ensure adherence to state and federal policies. Any findings as a result of the monitoring are settled in accordance with the established policies in the MDHS Subgrant/Contract Manual.

1.3.3. Describe the activities the Lead Agency will have in place to identify program violations and administrative error to ensure program integrity using the chart below.

Program violations may include intentional and unintentional client and/or provider violations as defined by the Lead Agency. Administrative error refers to **areas identified through the Error Rate Review** process (98.100). Check which activities, if any, the Lead Agency has chosen to conduct.

| Type of Activity | Identify Program Violations | Identify Administrative Error |
|---|-------------------------------------|-------------------------------------|
| Share/match data from other programs (e.g. TANF, Child and Adult Care Food Program (CACFP), Food and Nutrition Service (FNS), Medicaid)) | <input type="checkbox"/> | <input type="checkbox"/> |
| Share/match data from other databases (e.g., State Directory of New Hires, Social Security Administration, Public Assistance Reporting Information System (PARIS)) | <input type="checkbox"/> | <input type="checkbox"/> |
| Run system reports that flag errors Errors that would be identified through these reports include, but are not limited to children who have aged out of eligibility, authorizations attached to a provider left incomplete, authorizations that have expired but were not terminated, incomplete provider profiles, and fraud reports. | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> |
| Review of attendance or billing records | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> |
| Audit provider records | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> |
| Conduct quality control or quality assurance reviews | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> |
| Conduct on-site visits to providers or sub-recipients to review attendance or enrollment documents | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Conduct supervisory staff reviews | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| Conduct data mining to identify trends | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> |
| Train staff on policy and/or audits | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> |
| Other. Describe _____ | <input type="checkbox"/> | <input type="checkbox"/> |
| None | <input type="checkbox"/> | <input type="checkbox"/> |

For any option the Lead Agency checked in the chart above other than none, please describe

The Lead Agency will utilize the Child Care Information System (CCIS) to produce reports queried to help identify trends in the data, staff performance, and error rates. CCIS allows for case management and fiscal monitoring.

The Lead Agency's CCIS interfaces daily with the information system housing TANF data to collect referrals and terminations of child care subsidy. This interface helps ensure timely and accurate access to subsidy services.

If the Lead Agency checked none, please describe what measures the Lead Agency has or plans to put in place to address program integrity:

1.3.4. What strategies will the Lead Agency use to investigate and collect improper payments due to program violations or administrative error?

Check and describe in the chart below which strategies, if any, the Lead Agency will use for each of the following areas: Unintentional program violations (UPV), intentional program violations (IPV) and/or fraud, and administrative error as defined in your State/Territory. **The Lead Agency has the flexibility to recover misspent funds as a result of errors. The Lead Agency is required to recover misspent funds as a result of fraud (98.60(i)).**

| Strategy | UPV | IPV and/or Fraud | Administrative Error |
|---|-------------------------------------|-------------------------------------|-------------------------------------|
| Require recovery after a minimum dollar amount in improper payment. Identify the minimum dollar amount \$100 | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Coordinate with and refer to other State/Territory agency (e.g. State/Territory collection agency, law enforcement). Describe _____ | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Recover through repayment plans | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> |
| Reduce payments in subsequent months | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> |
| Recover through State/Territory tax intercepts | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Recover through other means. Describe _____ | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Establish a unit to investigate and collect improper payments. Describe composition of unit The MS Department of Human Services, Division of Program Integrity investigates improper payments. | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> |
| Other. Describe _____ | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| None | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

For any option the Lead Agency checked in the chart above other than none, please describe

[Through the development and implementation of the Child Care Information System \(CCIS\), transactional child care activity can easily be monitored and analyzed to determine the possible misuse of funds, the existence of fraudulent behavior, and the reduction and/or prevention of improper payments. The database system contains several parameters and edit checks designed to reduce the possible occurrence of improper payments.](#)

[The Lead Agency has also developed various internal control fiscal management reports that allow the CCA to obtain a “bird’s eye” view of child care transactions across the State of Mississippi. The reports are structured by federal regulatory guidelines. Subgrantees prepare and submit a monthly report to the Lead Agency,](#)

which are used in the development of monthly internal reports. In addition, the MDHS Department of Budgets and Accounting prepare reports quarterly. Thus, any significant irregularities in child care activity can easily be spotted and appropriate disciplinary actions immediately taken. Once possible improper payments have been identified, the Lead Agency will enact one of the following procedures:

1. If the improper payment is the result of Administrative Error, the CCA is notified and corrective measures are taken to recoup funds. Recoupments are made in 100% of findings related to administrative errors.
2. If the improper payment is the result of either intentional or unintentional program violations, the CCA is notified and the case is forwarded to the MDHS Division of Program Integrity for investigation. Recoupment efforts are made if it is determined that improper payments exceeding \$100.00 exist.

1.3.5. What type of sanction, if any, will the Lead Agency place on clients and providers to help reduce improper payments due to program violations?

☐ None

☒ Disqualify client. If checked, please describe, including a description of the appeal process for clients who are disqualified

Any dispute concerning a question of fact under application/agreement which is not disposed of by agreement of the parties hereto shall be decided by the DECCD Director. In the review by the DECCD Director, the parent/provider shall be afforded an opportunity to be heard and offer evidence in support of the questioned decision under review. This decision shall be reduced to writing and a copy thereof mailed or furnished to the parent/provider and shall be final and conclusive, unless, within thirty (30) days from the date of the decision, the parent/provider mails or furnishes the Executive Director of the Mississippi Department of Human Services a written request for review. Pending final decision of the Executive Director or his designee, the Lead Agency Staff will proceed in accordance with the decision of the DECCD Director.

☒ Disqualify provider. If checked, please describe, including a description of the appeal process for providers who are disqualified

Any dispute concerning a question of fact under application/agreement which is not disposed of by agreement of the parties hereto shall be decided by the DECCD Director. In the review by the DECCD Director, the parent/provider shall be afforded an opportunity to be heard and offer evidence in support of the questioned decision under review. This decision shall be reduced to writing and a copy thereof mailed or furnished to the parent/provider and shall be final and conclusive, unless, within thirty (30) days from the date of the decision, the parent/provider mails or furnishes the Executive Director of

the Mississippi Department of Human Services a written request for review. Pending final decision of the Executive Director or his designee, the Lead Agency Staff will proceed in accordance with the decision of the DECCD Director.

- ☒ Prosecute criminally
☐ Other. Describe. _____

1.3.6. Based on responses provided from Question 14 in the most recent ACF-402 report, please describe those actions the Lead Agency has taken or plans to take to reduce identified errors in the table below.

Territories not required to complete the Error Rate Review should mark ☐ N/A here.

| Activities identified in ACF-402 | Cause/Type of Error (if known) | Actions Taken or Planned | Completion Date (Actual or planned) (if known) |
|--|--------------------------------|---|---|
| The Lead Agency will perform internal reviews of the child care subsidy applications and all related supporting documentation, prior to the issuance of a child care certificate, to ensure accuracy and completeness. In addition, subgrantee training will be conducted on the MDHS Child Care Policy Manual, including but not limited to compliance with federal/state policies and regulation related to the subsidy program, procedures for issuing child care certificates, using CCIS and updated policies/regulations/procedures. | Unknown | <ol style="list-style-type: none"> 1. The Lead Agency will utilize CCIS to review staff workflow and ensure proper implementation according to established program policies. 2. Lead Agency staff is engaged in policy training each month at staff meetings. 3. CCIS prevents program staff from advancing through the eligibility process until all required documentation | <ol style="list-style-type: none"> 1. CCIS updates were completed in January 2013. 2. This process is ongoing. 3. CCIS updates were completed in January 2013. |

| Activities identified in ACF-402 | Cause/Type of Error (if known) | Actions Taken or Planned | Completion Date (Actual or planned) (if known) |
|----------------------------------|--------------------------------|--------------------------------|--|
| | | has been received and entered. | |

1.4. Consultation in the Development of the CCDF Plan

Lead Agencies are required to *consult* with appropriate agencies in the development of its CCDF Plan (§98.12, §98.14(a),(b), §98.16(d)).

Definition: *Consultation* involves the meeting with or otherwise obtaining input from an appropriate agency in the development of the State or Territory CCDF Plan. At a minimum, Lead Agencies must consult with representatives of general purpose local governments. (§§98.12(b), 98.14(a)(1))

1.4.1. Identify and describe in the table below who the Lead Agency consulted with in the development of the CCDF Plan (658D(b)(2), §§98.12(b), 98.14(b)).

| Agency/Entity | | Describe how the Lead Agency consulted with this Agency/entity in developing the CCDF Plan |
|--|--|--|
| <input checked="" type="checkbox"/> | Representatives of general purpose local government (required) This may include, but is not limited to: representatives from counties and municipalities, local human service agencies, local education representatives (e.g., school districts), or local public health agencies. | MDHS DECCD consulted with representatives from the County Board of Supervisors, Cities, towns, and municipalities. Some examples are the City of Jackson, Hancock County Board of Supervisors and the City of Starkville to obtain input on the development of the Mississippi State Plan and other policies and procedures relating to child care. Coordination involves child care and early childhood development services, utilizing certified spending offered by local or county government, state agencies, and municipalities as match for CCDF funds. |
| For the remaining agencies, check and describe (optional) any which the Lead Agency has chosen to consult with in the development of its CCDF Plan. | | |
| <input checked="" type="checkbox"/> | State/Territory agency responsible for public | Representatives are members of |

| Agency/Entity | | Describe how the Lead Agency consulted with this Agency/entity in developing the CCDF Plan |
|-------------------------------------|--|--|
| <input type="checkbox"/> | education This may include, but is not limited to, State/Territory pre-kindergarten programs (if applicable), programs serving school-age children (including 21 st Century Community Learning Centers), or higher education. | the Mississippi Early Childhood Advisory Council. All Council members were provided with copies of the draft State Plan for their comments and recommendations. |
| <input checked="" type="checkbox"/> | State/Territory agency responsible for programs for children with special needs This may include, but is not limited to: State/Territory early intervention programs authorized under the Individuals with Disabilities Education Act (Part C for infants and toddlers and Section 619 for preschool), or other State/Territory agencies that support children with special needs | Representatives are members of the Mississippi Early Childhood Advisory Council. All Council members were provided with copies of the draft State Plan for their comments and recommendations. |
| <input checked="" type="checkbox"/> | State/Territory agency responsible for licensing (if separate from the Lead Agency) | Representatives are members of the Mississippi Early Childhood Advisory Council. All Council members were provided with copies of the draft State Plan for their comments and recommendations. |
| <input checked="" type="checkbox"/> | State/Territory agency with the Head Start Collaboration grant | Representatives are members of the Mississippi Early Childhood Advisory Council. All Council members were provided with copies of the draft State Plan for their comments and recommendations. |
| <input checked="" type="checkbox"/> | Statewide Advisory Council authorized by the Head Start Act | All members of the Council were provided with the link to the draft State Plan in order to collect feedback and input on finalizing its development. |
| <input checked="" type="checkbox"/> | Other Federal, State, local, Tribal (if applicable), and/or private agencies providing early childhood and school-age/youth-serving developmental services | Representatives are members of the Mississippi Early Childhood Advisory Council. All Council members were provided with copies of the draft State Plan for their comments and recommendations. |
| <input type="checkbox"/> | State/Territory agency responsible for the Child and Adult Care Food Program (CACFP) | |
| <input checked="" type="checkbox"/> | State/Territory agency responsible for implementing the Maternal and Early Childhood Home Visitation programs grant | The Lead Agency is the recipient of these funds. |

| Agency/Entity | Describe how the Lead Agency consulted with this Agency/entity in developing the CCDF Plan |
|---|---|
| <input checked="" type="checkbox"/> State/Territory agency responsible for public health (including the agency responsible for immunizations and programs that promote children's emotional and mental health) | Representatives are members of the Mississippi Early Childhood Advisory Council. All Council members were provided with copies of the draft State Plan for their comments and recommendations. |
| <input checked="" type="checkbox"/> State/Territory agency responsible for child welfare | Copies of the draft were provided to the Director of MDHS Division of Family & Children's Services for comments and recommendations. |
| <input type="checkbox"/> State/Territory liaison for military child care programs or other military child care representatives | |
| <input type="checkbox"/> State/Territory agency responsible for employment services/workforce development | |
| <input checked="" type="checkbox"/> State/Territory agency responsible for Temporary Assistance for Needy Families (TANF) | Copies of the draft were provided to the Director of MDHS Division of Field Operations for comments and recommendations. |
| <input checked="" type="checkbox"/> Indian Tribes/Tribal Organizations <input type="checkbox"/> N/A: No such entities exist within the boundaries of the State | Copies of the draft State Plan were provided to the Tribla Organizatio for comments and recommendations. The Lead Agency met with representatives of the Tribe to discuss changes and requirement of State Plan submission. |
| <input type="checkbox"/> Private agencies/entities including national initiatives that the Lead Agency is participating in such as BUILD, Strengthening Families, Mott Statewide After-school Networks, Ready by 21 | The State Administrator attended two meetings hosted by BUILD in which various policy initiatives were discussed. |
| <input checked="" type="checkbox"/> Provider groups, associations or labor organizations | Representatives are members of the Mississippi Early Childhood Advisory Council. All Council members were provided with copies of the draft State Plan for their comments and recommendations. |
| <input type="checkbox"/> Parent groups or organizations | |
| <input checked="" type="checkbox"/> Local community organizations and institutions(child care resource and referral, Red Cross) | Representatives are members of the Mississippi Early Childhood Advisory Council. All Council members were provided with copies of the draft State Plan for their comments and |

| Agency/Entity | | Describe how the Lead Agency consulted with this Agency/entity in developing the CCDF Plan recommendations. |
|--------------------------|-------|---|
| <input type="checkbox"/> | Other | |

1.4.2. Describe the Statewide/Territory-wide public hearing process held to provide the public an opportunity to comment on the provision of child care services under this Plan. (658D(b)(1)(C), §98.14(c))

At a minimum, the description should include:

- g) Date(s) of notice of public hearing: [05/21/2013](#)
Reminder - Must be at least 20 days prior to the date of the public hearing.
- h) How was the public notified about the public hearing?
[The notice was placed on the Lead Agency's website on 05/21/2013. An email notice was sent to SECAC members on 05/22/2013. An ad ran in 12 newspapers across the state on 05/28/2013 and 06/04/2013](#)
- i) Date(s) of public hearing(s): [06/17/2013](#)
Reminder - Must be no earlier than 9 months before effective date of Plan (October 1, 2013).
- j) Hearing site(s): [Mississippi Public Broadcasting Auditorium
3825 Ridgewood Road
Jackson, MS 39211](#)
- k) How was the content of the Plan made available to the public in advance of the public hearing(s)?
[A draft of the Plan was made available to all parties through the Lead Agency's website.](#)
- l) How will the information provided by the public be taken into consideration in the provision of child care services under this Plan?
[All comments received from the public will be compiled and reviewed by the State Administrator. Any comments that can support the strengthening of the Plan will be incorporated where possible.](#)

1.4.3. Describe any strategies used by the Lead Agency to increase public consultation on the Plan or access to the public hearing.

For example, translating the public hearing notice into multiple languages, using a variety of sites or technology (e.g., video) for the public hearing, holding the hearing at times to accommodate parent and provider work schedules.

[Based on the Lead Agency's experience with holding public hearings, those meetings held in the afternoon have produced the greatest turnout. The public hearing to collect comments from interested parties is scheduled from 1:00-4:00 PM in order to offer adequate time for response. The Lead Agency also solicited comments on the Plan from interested parties through email. This address was posted on the Lead Agency's website and in newspapers.](#)

In accordance with the Mississippi Secretary of State's Office, the Lead Agency will hold an additional hearing on the State Plan, as per usual filing procedures. At the time of Plan submission, this meeting is scheduled for September 23, 2013 from 12:00 PM to 2:00 PM at the Hinds County Extension Service Office in Jackson, Mississippi.

1.5. Coordination Activities to Support the Implementation of CCDF Services

Lead Agencies are required to *coordinate* with other Federal, State, local, Tribal (if applicable) and private agencies providing child care and early childhood development services (§98.12, §98.14(a),(b), §98.16(d)).

Definition - *Coordination* involves child care and early childhood and school-age development services efforts to work across multiple entities, both public and private (such as in connection with a State Early Childhood Comprehensive System (SECCS) grant or the State Advisory Council funded under the Head Start Act of 2007). (658D(b)(1)(D), §§98.12(a), 98.14(a)(1))

Note: Descriptions of [how governments are organized for each State](#) are provided at census.gov.

1.5.1. Identify and describe in the table below with whom the Lead Agency coordinates in the delivery of child care and early childhood and school-age services (§98.14(a)(1)).

| Agency/Entity (check all that apply) | Describe how the Lead Agency will coordinate with this Agency/entity in delivering child care and early childhood services | Describe results expected from the coordination |
|---|--|--|
| <input checked="" type="checkbox"/> Representatives of general purpose local government This may include, but is not limited to: representatives from counties and municipalities, local education representatives, or local public health agencies. | The Lead Agency is the recipient of the Maternal, Infant and Child Health home visiting funds. Through the implementation of this program, coordination with LEAs, county health departments, county | Examples might include increased supply of full-day/full-year services, aligned eligibility policies, blended funding, or access to more training and technical assistance resources shared across agencies. The Lead Agency will coordinate with these entities to increase access to community resources such as TANF, SNAP, WIC, Medicaid, child care subsidy, CHiP, immunizations, child support, GED and |

| Agency/Entity (check all that apply) | | Describe how the Lead Agency will coordinate with this Agency/entity in delivering child care and early childhood services | Describe results expected from the coordination |
|---|---|--|--|
| | | DHS offices, local law enforcement and local government representatives will be imperative. | alternative education options. |
| <input checked="" type="checkbox"/> | State/Territory agency responsible for public education (required) This may include, but is not limited to, State/Territory pre-kindergarten programs (if applicable), programs serving school-age children (including 21 st Century Community Learning Centers), or higher education; | The Lead Agency funds the Out-of-School Project which works with public and private school age care providers to offer mentoring and quality evaluation. | The Lead Agency's support of this program will result in increased support for and quality of existing school age care services. |
| <input checked="" type="checkbox"/> | Other Federal, State, local, Tribal (if applicable), and/or private agencies providing early childhood and school-age/youth-serving developmental services (required) | Coordination will be achieved through the Lead Agency's participation in the Mississippi Department of Health's Expanding Opportunities Initiative. | Through participation, the Lead Agency is working to increase the number of quality inclusive learning environments for children with special needs. |

| Agency/Entity (check all that apply) | Describe how the Lead Agency will coordinate with this Agency/entity in delivering child care and early childhood services | Describe results expected from the coordination |
|--|---|---|
| <input checked="" type="checkbox"/> State/Territory agency responsible for public health (required) This may include, but is not limited to, the agency responsible for immunizations and programs that promote children's emotional and mental health | <u>Coordination is achieved through participation on the MS Department of Health, Division of Child Care Licensure Board and through partnership on the Maternal, Infant, and Child Health Home Visitation Grant. All licensed providers are required by MS Dept. of Health licensure regulations to have copies of immunizations for staff and children. This group monitors the presence of these records for the Lead Agency during onsite visits with these programs. Coordination will be achieved through the previously mentioned home visiting program and the Lead Agency's funding of the MS Child Care Resource and Referral Network's (MSCCR&R) child care provider training surrounding healthy development.</u> | Examples might include increased supply of full-day/full-year services, aligned eligibility policies, blended funding, or access to more training and technical assistance resources shared across agencies. <u>Through this collaboration, the Lead Agency is working to strengthen the health and safety of home and child care environments for children across the state. The Lead Agency's goals, in addition to the previously mentioned goals related to the home visiting program are to provide support to care givers in healthy social and emotional development of young children.</u> |

| Agency/Entity (check all that apply) | Describe how the Lead Agency will coordinate with this Agency/entity in delivering child care and early childhood services | Describe results expected from the coordination |
|---|--|---|
| <input checked="" type="checkbox"/> | <p>State/Territory agency responsible for employment services / workforce development (required)</p> <p><u>Coordination will include the MSCCR&R's child care provider professional development registry, CDA mentoring and scholarship program, child care director's credentialing program and the Mississippi Longitudinal Data System. Currently, an agreement is in place for students who have earned a CDA that includes an alignment of CDA credentials and requirements for an AA in state community colleges.</u></p> | <p>Examples might include increased supply of full-day/full-year services, aligned eligibility policies, blended funding, or access to more training and technical assistance resources shared across agencies.</p> <p><u>The Lead Agency expects to examine data across these programs to determine how assistance in workforce development can be provided.</u></p> |
| <input checked="" type="checkbox"/> | <p>State/Territory agency responsible for providing Temporary Assistance for Needy Families (TANF) including local human service agencies(required)</p> <p><u>Currently, the Lead Agency is coordinating with the MDHS Division of Field Operations (formerly Economic Assistance) on the development of a centralized application for child care subsidy and TANF. Additionally, the Lead Agency has created a data interface with TANF in order to receive referrals and</u></p> | <p><u>The Lead Agency expects the use of a centralized application to decrease the enrollment period and allow for expedited service delivery. The Lead Agency has seen reduced wait time for new TANF client in receipt of subsidy services through the implementation of</u></p> |

| Agency/Entity (check all that apply) | Describe how the Lead Agency will coordinate with this Agency/entity in delivering child care and early childhood services | Describe results expected from the coordination |
|--|---|--|
| | terminations for subsidy on a daily basis. | inter-divisional system interfaces. this interface. |
| <input checked="" type="checkbox"/> Indian Tribes/Tribal Organizations (required) <input type="checkbox"/> N/A: No such entities exist within the boundaries of the State | Coordination is achieved by working with Tribal Organization representatives serving on the Mississippi Early Childhood Advisory Council <u>and through meetings.</u> | The Lead Agency's goal is to ensure all populations' needs are represented through the work of the Council. |
| For the remaining agencies, check and describe (optional) any with which the Lead Agency has chosen to coordinate early childhood and school-age service delivery | | |
| <input checked="" type="checkbox"/> State/Territory agency with the Head Start Collaboration grant | The Lead Agency Coordinates with the Head Start Collaboration Office and the Mississippi Head Start Association. | The Lead Agency's goal is to create a crosswalk comparison of Head Start standards with licensing regulations to identify any differences. The Lead Agency believes this will allow for targeted training and technical assistance and increased participation of HS programs in QRIS. |
| <input type="checkbox"/> State/Territory agency responsible for Race to the Top – Early Learning Challenge (RTT-ELC) <input checked="" type="checkbox"/> N/A: State/Territory does not participate in RTT-ELC | | |
| <input type="checkbox"/> State/Territory agency responsible for the Child | | |

| Agency/Entity (check all that apply) | | Describe how the Lead Agency will coordinate with this Agency/entity in delivering child care and early childhood services | Describe results expected from the coordination |
|--|--|--|--|
| <input type="checkbox"/> and Adult Care Food Program (CACFP) | | | Examples might include increased supply of full-day/full-year services, aligned eligibility policies, blended funding, or access to more training and technical assistance resources shared across agencies. |
| <input checked="" type="checkbox"/> | State/Territory agency responsible for programs for children with special needs This may include, but is not limited to: State/Territory early intervention programs authorized under the Individuals with Disabilities Education Act (Part C for infants and toddlers and Section 619 for preschool), or other State/Territory agencies that support children with special needs | The Lead Agency Coordinates with the Mississippi Department of Health, Part C Coordinator and funds the Project PREPARE program. | The Lead Agency's goal is to improve the number of and access to appropriate inclusive learning environments for children with special needs. |
| <input checked="" type="checkbox"/> | State/Territory agency responsible for implementing the Maternal and Early Childhood Home Visitation programs grant | The Lead Agency is the recipient of these funds. | |
| <input checked="" type="checkbox"/> | State/Territory agency responsible for child welfare | The Lead Agency Coordinates with the MDHS Division of Child and Family Services to serve <u>children in foster/protective/preventive care.</u> | The Lead Agency's goal is to provide subsidy to all children in protective and preventive care and foster children. |
| <input type="checkbox"/> | State/Territory liaison for military child care programs or other military child care representatives | | |

| Agency/Entity (check all that apply) | | Describe how the Lead Agency will coordinate with this Agency/entity in delivering child care and early childhood services | Describe results expected from the coordination |
|---|--|--|--|
| <input type="checkbox"/> | Private agencies/entities including national initiatives that the Lead Agency is participating in such as BUILD, Strengthening Families, Mott Statewide After-school Networks, Ready by 21 | | Examples might include increased supply of full-day/full-year services, aligned eligibility policies, blended funding, or access to more training and technical assistance resources shared across agencies. |
| <input type="checkbox"/> | Local community organizations (child care resource and referral, Red Cross) | | |
| <input type="checkbox"/> | Provider groups, associations or labor organizations | | |
| <input type="checkbox"/> | Parent groups or organizations | | |
| <input type="checkbox"/> | Other | | |

1.5.2. Does the State/Territory have a formal early childhood and/or school-age coordination plan?

Lead Agencies are not required to have an early childhood nor a school-age coordination plan, but the State/Territory may have such plans for other purposes, including fulfilling requirements of other programs.

- ☐ Yes. If yes,
- e) Provide the name of the entity responsible for the coordination plan(s):
 - f) Describe the age groups addressed by the plan(s):
 - g) Indicate whether this entity also operates as the State Advisory Council (as authorized under the Head Start Act of 2007):
 - ☐ Yes
 - ☐ No
 - h) Provide a web address for the plan(s), if available: _____
- ☒ No

1.5.3. Does the State/Territory have a designated entity(ies) responsible for coordination across early childhood and school-age programs?

(658D(b)(1)(D), §98.14(a)(1))

Check which entity(ies), if any, the State/Territory has chosen to designate.

☐ State/Territory-wide early childhood and/or school-age cabinet/advisory council/task force/commission.

If yes, describe entity, age groups and the role of the Lead Agency

☒ State Advisory Council (as described under the Head Start Act of 2007).

If yes, describe entity, age groups and the role of the Lead Agency

In 2008, Governor Haley Barbour established the State Early Childhood Advisory Council of Mississippi to develop a strategic plan to coordinate efforts, programs, and resources supporting children birth to five years and to identify opportunities for and barriers to collaboration and coordination among programs and agencies.

The State Child Care Administrator was appointed by former Governor Barbour to serve on this Council. The State Child Care Administrator's appointment was renewed by Governor Phil Bryant, the state's current governor.

☐ Local Coordination/Council

If yes, describe entity, age groups and the role of the Lead Agency

☐ Other.

Describe _____

☐ None

1.5.4. Does the Lead Agency conduct or plan to conduct activities to encourage public-private partnerships that promote private sector involvement in meeting child care needs? (§98.16(d))

☒ Yes. If yes, **describe** these activities or planned activities, including the tangible results expected from the public-private partnership

The Lead Agency plans to continue its non-competitive Child Care Partnership Program. The Child Care Partnership Program is a special initiative developed by DECCD to encourage partnerships in addressing employee/community child care needs. This is a federal matching grant program to encourage local commitment to child care through community-generated financial resources that can be matched with federal funds. Applicants eligible for consideration for a direct subgrant include local or county government, state agencies and municipalities, industries, consortiums and foundations. Some examples of current partnerships include:

- City of Jackson public/public partnerships
- City of Starkville has a public/private partnership

- Hancock County Human Resources Agency public/public partnership
- Hinds Community College public/public partnership
- City of Vicksburg has a public/private partnership

These programs served 736 children last year and projections indicate service to the same number for the upcoming year.

☐ No.

1.6. Child Care Emergency Preparedness and Response Plan

It is recommended, but not required, that each Lead Agency develop a plan to address preparedness, response, and recovery efforts specific to child care services and programs. Plans should cover the following areas: 1) planning for continuation of services to CCDF families; 2) coordination with other State/Territory agencies and key partners; 3) emergency preparedness regulatory requirements for child care providers; 4) provision of temporary child care services after a disaster; and 5) rebuilding child care after a disaster. For further guidance on developing Child Care Emergency Preparedness and Response Plans see the [Information Memorandum \(CCDF-ACF-IM-2011-01\)](#) located on the Office of Child Care website.

1.6.1. Indicate which of the following best describes the current status of your efforts in this area. Check only ONE.

- ☐ **Planning.** Indicate whether steps are under way to develop a plan. If so, describe the time frames for completion and/or implementation, the steps anticipated and how the plan will be coordinated with other emergency planning efforts within the State/Territory.
- ☒ **Developed.** A plan has been developed as of [03/01/2009](#) and put into operation as of [03/01/2009](#), if available. Provide a web address for this plan, if available: www.mdhs.state.ms.us/eccd_providers1
- ☐ **Other. Describe:** _____

1.6.2. Indicate which of the core elements identified in the Information Memorandum are or will be covered in the Lead Agency child care emergency preparedness and response plan.

Check which elements, if any, the Lead Agency includes in the plan.

- ☒ Planning for continuation of services to CCDF families
- ☒ Coordination with other State/Territory agencies and key partners
- ☒ Emergency preparedness regulatory requirements for child care providers
- ☒ Provision of temporary child care services after a disaster
- ☐ Restoring or rebuilding child care facilities and infrastructure after a disaster
- ☐ None

PART 2

CCDF SUBSIDY PROGRAM ADMINISTRATION

This section focuses on the child care assistance program. Lead Agencies are asked to describe their efforts to inform parents about the CCDF subsidy program and application policies and procedures, eligibility criteria, sliding fee scale, payment rate policies and procedures, and how Lead Agencies ensure continuity of care and parental choice of high quality settings for families.

2.1. Administration of the Program

The Lead Agency has broad authority to administer (i.e., establish rules) and operate (i.e., implement activities) the CCDF program through other governmental, non-governmental, or other public or private local agencies as long as it retains overall responsibility for the administration of the program. (658D(b), §98.11(a))

2.1.1. Which of the following CCDF program rules and policies are set or established at the State/Territory versus the local level?

Identify the level at which the following CCDF program rules and policies are established.

- ☒ Eligibility rules and policies (e.g., income limits) are set by the:
 - ☒ State/Territory
 - ☐ Local entity. If checked, identify the type of policies the local entity(ies) can set _____
 - ☐ Other. Describe: _____
- ☒ Sliding fee scale is set by the:
 - ☒ State/Territory
 - ☐ Local entity. If checked, identify the type of policies the local entity(ies) can set _____
 - ☐ Other. Describe: _____
- ☒ Payment rates are set by the:
 - ☒ State/Territory
 - ☐ Local entity. If checked, identify the type of policies the local entity(ies) can set _____
 - ☐ Other. Describe: _____

2.1.2. How is the CCDF program operated in your State/Territory?

In the table below, identify which agency(ies) performs these CCDF services and activities.

| Implementation of CCDF Services/Activities | Agency (Check all that apply) |
|--|--|
| Who determines eligibility? | <input checked="" type="checkbox"/> CCDF Lead Agency <input type="checkbox"/> TANF agency <input type="checkbox"/> Other State/Territory agency. Describe. _____ <input type="checkbox"/> Local government agencies such as county welfare or |

| Implementation of CCDF Services/Activities | Agency (Check all that apply) |
|---|---|
| Note: If different for families receiving TANF benefits and families not receiving TANF benefits, please describe: _____ | social services departments <input type="checkbox"/> Child care resource and referral agencies <input type="checkbox"/> Community-based organizations <input checked="" type="checkbox"/> Other. Describe. <u>Slot contractors use eligibility guidelines established by the Lead Agency to determine the eligibility of families for a child care slot in their program.</u> |
| Who assists parents in locating child care (consumer education)? | <input checked="" type="checkbox"/> CCDF Lead Agency <input type="checkbox"/> TANF agency <input checked="" type="checkbox"/> Other State/Territory agency. Describe. <u>The Mississippi Department of Health, Division of Child Care Licensure</u> <input type="checkbox"/> Local government agencies such as county welfare or social services departments <input checked="" type="checkbox"/> Child care resource and referral agencies <input type="checkbox"/> Community-based organizations <input type="checkbox"/> Other. Describe. _____ |
| Who issues payments? | <input checked="" type="checkbox"/> CCDF Lead Agency <input type="checkbox"/> TANF agency <input type="checkbox"/> Other State/Territory agency. Describe. _____ <input type="checkbox"/> Local government agencies such as county welfare or social services departments <input type="checkbox"/> Child care resource and referral agencies <input type="checkbox"/> Community-based organizations <input checked="" type="checkbox"/> Other. Describe. <u>The Lead Agency contracts with Xerox for electronic child care attendance systems. Based on attendance recorded by the MS eChildcare system, the Lead Agency approves payment that is issued by direct deposit to providers from Xerox.</u> |
| Describe to whom is the payment issued (e.g., parent or provider) and how are payments distributed (e.g., electronically, cash, etc) | <u>Payments are issued by direct deposit to providers twice monthly by paper check once per month to providers.</u> |
| Other. List and describe: _____ | |

2.2. Family Outreach and Application Process

Lead Agencies must inform parents of eligible children and the general public of the process by which they can apply for and potentially receive child care services. (658D(b)(1)(A), 658E(c)(2)(D) & (3)(B), §§98.16(k), 98.30(a)-(e). **Note** - For any information in questions 2.2.1 through 2.2.10 that differs or will differ for families receiving TANF, please describe in 2.2.11.

2.2.1. By whom and how are parents informed of the availability of child care assistance services under CCDF? (658E(c)(2)(A), §98.30(a))

Check all agencies and strategies that will be used in your State/Territory.

- ☒ CCDF Lead Agency
- ☒ TANF offices
- ☐ Other government offices
- ☒ Child care resource and referral agencies

- ☐ Contractors
- ☒ Community-based organizations
- ☐ Public schools
- ☒ Internet (provide website): www.childcareinfo.ms
- ☒ Promotional materials
- ☒ Community outreach meetings, workshops or other in-person meetings
- ☐ Radio and/or television
- ☒ Print media
- ☐ Other. Describe: _____

2.2.2. How can parents apply for CCDF services?

Check all application methods that your State/Territory has chosen to implement.

- ☐ In person interview or orientation
- ☒ By mail
- ☒ By Phone/Fax
- ☒ Through the Internet (provide website) www.childcareinfo.ms
- ☒ By Email
- ☐ Through a State/Territory Agency
- ☒ Through an organization contracted by the State/Territory
- ☐ Other. Describe: _____

2.2.3. Describe how the Lead Agency provides consumer education to parents applying for CCDF assistance to promote informed choices about the quality of care provided by various providers in their communities.

Lead Agencies must certify that the State/Territory will collect and disseminate to parents of eligible children and the general public, consumer education information that will promote informed child care choices(658E (c)(2)(G), §98.33).

For example, memorandums of understanding with resource and referral agencies to provide consumer education to families applying for CCDF assistance, providing parents with provider lists showing licensing history and/or Quality Rating and Improvement System (QRIS) ratings, or informational brochures that address importance of quality and different care options available.

The Lead Agency provides informational brochures that demonstrate high quality child care. In addition, the Lead Agency funds the MSCCR&R which provides parent education and referral services for selecting child care options. The Lead Agency provides parents a way to search for providers on their website. This information display's a provider's quality rating.

2.2.4. Describe how the Lead Agency will support child care programs to increase the likelihood that CCDF-served children receive higher quality care as defined in your State/Territory.

For example, methods used to promote upward movement in quality rating and improvement system, methods used to encourage high quality programs to

participate in the subsidy program such as tiered reimbursement, or incentives used to support high quality programs in rural, suburban, urban, and low-income communities.

The Lead Agency works to increase the likelihood that children receiving child care subsidies have access to higher quality care by providing quality bonuses for every child receiving subsidy to child care providers participating in the Mississippi Child Care Quality Step System (QRIS). The QRIS is a five star system providing 7% (two star), 17% (three star), 22% (four star) and 25% (five star) increases in total monthly subsidies. In an effort to support the provider's success in the QRIS, the Lead Agency conducts an annual Child Care Facility Needs Assessment and responds with resources, identified by providers and designed to increase star ratings. In addition, the Lead Agency funds professional development and training and technical assistance programs at no cost to participants.

2.2.5. Describe how the Lead Agency promotes access to the CCDF subsidy program? Check the strategies implemented by your State/Territory.

- ☒ Provide access to program office/workers such as:
 - ☐ Providing extended office hours
 - ☐ Accepting applications at multiple office locations
 - ☒ Providing a toll-free number for clients
 - ☐ Email/online communication
 - ☐ Other. Describe: _____
- ☒ Using a simplified eligibility determination process such as:
 - ☒ Simplifying the application form (such as eliminating unnecessary questions, lowering the reading level)
 - ☒ Developing a single application for multiple programs
 - ☒ Developing web-based and/or phone-based application procedures
 - ☐ Coordinating eligibility policies across programs. List the program names _____
 - ☐ Streamlining verification procedures, such as linking to other program data systems
 - ☒ Providing information multi-lingually
 - ☒ Including temporary periods of unemployment in eligibility criteria (job search, seasonal unemployment). Length of time **60 days** (Note: this period of unemployment should be included in the Lead Agency's definition of working, or job training/educational program at 2.3.3).
 - ☐ Other. Describe: _____
- ☐ Other. Describe: _____
- ☐ None

2.2.6. Describe the Lead Agency's policies to promote continuity of care for children and stability for families.

Check the strategies, if any, that your State/Territory has chosen to implement.

- ☒ Provide CCDF assistance during periods of job search. Length of time **60 days**

- ☐ Establish two-tiered income eligibility to allow families to continue to receive child care subsidies if they experience an increase in income but still remain below 85% of State median income (SMI)
- ☐ Synchronize review date across programs. List programs: _____
- ☒ Longer eligibility re-determination periods (e.g., 1 year). Describe [Eligibility periods are one year in length for working parents.](#)
- ☐ Extend periods of eligibility for families who are also enrolled in either Early Head Start or Head Start and pre-k programs. Describe _____
- ☐ Extend periods of eligibility for school-age children under age 13 to cover the school year. Describe _____
- ☐ Minimize reporting requirements for changes in family's circumstances that do not impact families' eligibility, such as changes in income below a certain threshold or change in employment
- ☐ Individualized case management to help families find and keep stable child care arrangements. Describe _____
- ☐ Using non-CCDF Funds to continue subsidy for families who no longer meet eligibility, such as for children who turn 13 years of age during the middle of a program year
- ☐ Other. Describe _____
- ☐ None

2.2.7. How will the Lead Agency provide outreach and services to eligible families with limited English proficiency?

Check the strategies, if any, that your State/Territory has chosen to implement.

- ☐ Application in other languages (application document, brochures, provider notices)
- ☐ Informational materials in non-English languages
- ☐ Training and technical assistance in non-English languages
- ☐ Website in non-English languages
- ☐ Lead Agency accepts applications at local community-based locations
- ☐ Bilingual caseworkers or translators available
- ☐ Outreach Worker
- ☒ Other:

[The Lead Agency has requested translation assistance from an internal agency division for applications. This process is not complete at this time. Additionally, the Lead Agency has developed brochures for non-English and low-literacy individuals to assist them with identifying quality child care environments. These can be viewed at:](#)

http://www.mdhs.state.ms.us/pdfs/eccd_0to2yrs_brochure.pdf

http://www.mdhs.state.ms.us/pdfs/eccd_3to5yrs_brochure.pdf

[Educational materials regarding the QRIS are printed in Spanish. Training materials for MS eChildcare are available in Spanish and Vietnamese. Lead Agency staff contains Spanish speakers that can assist on calls to the office when needed.](#)

☐ None

If the Lead Agency checked any option above related to providing information or services in other non-English languages, please list the languages offered _____

2.2.8. How will the Lead Agency overcome language barriers with providers?

Check the strategies, if any, that your State/Territory has chosen to implement.

- ☒ Informational materials in non-English languages
- ☐ Training and technical assistance in non-English languages
- ☐ CCDF health and safety requirements in non-English languages
- ☒ Provider contracts or agreements in non-English languages
- ☒ Website in non-English languages
- ☐ Bilingual caseworkers or translators available
- ☐ Collect information to evaluate on-going need, recruit, or train a culturally or linguistically diverse workforce
- ☐ Other: _____
- ☐ None

If the Lead Agency checked any option above related to providing information or services in other non-English languages, please list the languages offered

The Lead Agency has some information available in Vietnamese and Spanish. Addition materials such as Provider Agreements and website information are currently being translated into Spanish.

2.2.9. Describe how the Lead Agency documents and verifies applicant information using the table below. (§98.20(a))

Check the strategies that will be implemented by your State/Territory. Attach a copy of your parent application for the child care subsidy program(s) as

Attachment 2.2.9 or provide a web address, if available _____

http://www.mdhs.state.ms.us/pdfs/eccd_A_ElectronicApplicationForm.pdf,
http://www.mdhs.state.ms.us/pdfs/eccd_B_ElectronicParentSOAForm.pdf,
http://www.mdhs.state.ms.us/pdfs/eccd_C_EligibilityChecklist.pdf,
http://www.mdhs.state.ms.us/pdfs/eccd_D_ElectronicGuardianshipForm.pdf,
[http://www.mdhs.state.ms.us/pdfs/eccd_E_ElectronicChildSupportVerificationForm.p
df](http://www.mdhs.state.ms.us/pdfs/eccd_E_ElectronicChildSupportVerificationForm.pdf),
http://www.mdhs.state.ms.us/pdfs/eccd_parentsrights.pdf

Reminder – Lead Agencies are reminded that, for purposes of implementing the citizenship verification requirements mandated by title IV of Personal Responsibility and Work Opportunity Reconciliation Act, only the citizenship and immigration status of the child, who is the primary beneficiary of the child care benefit, is relevant for eligibility purposes. (ACYF-PI-CC-98-08) States may not deny child care benefits to an eligible child because the parent(s), legal guardians, persons standing *in loco*

parentis, or other household members have not provided information regarding their immigration status.

| The Lead Agency requires documentation of: | Describe how the Lead Agency documents and verifies applicant information: |
|---|--|
| <input checked="" type="checkbox"/> Applicant identity | Current driver's license or state issued ID, birth certificate |
| <input type="checkbox"/> Household composition | |
| <input checked="" type="checkbox"/> Applicant's relationship to the child | Birth certificate, open child support case |
| <input checked="" type="checkbox"/> Child's information for determining eligibility (e.g., identity, age, etc.) | Birth certificate |
| <input checked="" type="checkbox"/> Work, Job Training or Educational Program | Employment: check stubs, or letter from employer if newly hired or paid in cash Education: verification of full-time enrollment from educational institution. |
| <input checked="" type="checkbox"/> Income | Pay check stubs, and verification of receipt of other income such as child support. |
| <input checked="" type="checkbox"/> Other. Describe Verification of cooperation with Child Support. | Verification from the MDHS, Division of Child Support Enforcement that client is cooperating. |

2.2.10. Which strategies, if any, will the Lead Agency use to assure the timeliness of eligibility determinations upon receipt of applications?

- ☐ Time limit for making eligibility determinations. Describe length of time _____
- ☒ Track and monitor the eligibility determination process
- ☐ Other. Describe _____
- ☐ None

2.2.11. Are the policies, strategies or processes provided in questions 2.2.1. through 2.2.10 different for families receiving TANF? (658E(c)(2)(H) & (3)(D), §§98.16(g)(4), 98.33(b), 98.50(e))

- ☐ Yes. If yes, describe: _____
- ☒ No.

2.2.12. Informing parents who receive TANF benefits about the exception to the individual penalties associated with the TANF work requirement

The regulations at §98.33(b) require the Lead Agency to inform parents who receive TANF benefits about the exception to the individual penalties associated with the work requirement for any single custodial parent who has a demonstrated inability to obtain needed child care for a child under 6 years of age. Lead Agencies must coordinate with TANF programs to ensure, pursuant that TANF families with young children will be informed of their right not to be sanctioned if they meet the criteria set forth by the State TANF agency in accordance with section 407(e)(2) of the Social Security Act.

In fulfilling this requirement, the following criteria or definitions are applied by the TANF agency to determine whether the parent has a demonstrated inability to obtain needed child care. **NOTE:** The TANF agency, not the CCDF Lead Agency, is responsible for establishing the following criteria or definitions. These criteria or definitions are offered in this Plan as a matter of public record.

a) Identify the TANF agency that established these criteria or definitions:
State/Territory TANF Agency
[Mississippi Department of Human Services, Division of Field Operations.](#)

b) Provide the following definitions established by the TANF agency.
"appropriate child care":

[Appropriate child care is defined as a licensed child care center or a family day care \(home or an individual\) chosen by the parent/caretaker relative to care for the child. The child care provider must be 18 years old or older.](#)

"reasonable distance":

[Appropriate child care must be within a reasonable distance \(within a 20-mile radius\) of the parent/caretaker relative's home or worksite.](#)

"unsuitability of informal child care":

[Unavailable or unsuitable child care shall be defined as a situation involving child abuse, neglect or an unsafe environment. If the parent/caretaker relative refuses to take the child to a particular day care center, he/she must inform the case manager of the reason for the refusal. The case manager must investigate to verify and substantiate the parent's claim of unsuitable child care. Complaints involving child abuse, neglect or an unsafe environment will be reported to the MS State Health Department, Division of Child Care Facilities Licensure. The case manager must contact the Office of Children and Youth's Designated Agent \(now the Division of Early Childhood Care and Development\) to discuss the problem and determine what other child care services are available in the area. The case manager will determine good cause for non-participation based on the investigation and information gathered.](#)

"affordable child care arrangements":

[Affordable formal child care is child care that is equal to or less than the established rates for the type of care according to the OCY Child Care Policy Manual \(now Mississippi Child Care Payment Program Policy Manual\).](#)

c) How are parents who receive TANF benefits informed about the exception to individual penalties associated with the TANF work requirements?

- ☒ In writing
☐ Verbally
☐ Other: _____

2.3. Eligibility Criteria for Child Care

In order to be eligible for services, children must (1) be under the age of 13, or under the age of 19 if the child is physically or mentally disabled or under court supervision; (2) reside with a family whose income is less than 85 percent of the State's median income for a family of the same size; and (3) reside with a parent or parents who is working or attending job training or an educational program; or (4) be receiving or needs to receive protective services. (658P(3), §98.20(a))

2.3.1. How does the Lead Agency define the following eligibility terms?

- *residing with* - living with, including taking meals and sleeping in the same house.
- *in loco parentis* – in place of parent, for example, a guardian or a relative or friend with whom the child resides if the child's parent is unable to act as the parent or has delegated his or her authority to someone else. The term describes someone who provides care and supervision like a parent but without going through the formalities of legal adoption or guardianship.

2.3.2. Eligibility Criteria Based Upon Age

a) The Lead Agency serves children from six weeks to 12 years 11 mo. (may not equal or exceed age 13).

b) Does the Lead Agency allow CCDF-funded child care for children age 13 and above but below age 19 years who are physically and/or mentally incapable of self-care? (658E(c)(3)(B), 658P(3), §98.20(a)(1)(ii))

☒ Yes, and the upper age is 18 years, 11 mo. (may not equal or exceed age 19).
 Provide the Lead Agency definition of *physical or mental incapacity* – a child under age 19 who meets the SSI definition of disability by having medically proven physical or mental condition(s) that cause marked and severe functional limitations expected to last at least 12 months in duration.

☐ No.

c) Does the Lead Agency allow CCDF-funded child care for children age 13 and above but below age 19 years who are under court supervision? (658P(3), 658E(c)(3)(B), §98.20(a)(1)(ii))

- ☐ Yes, and the upper age is _____ (may not equal or exceed age 19)
☒ No.

2.3.3. Eligibility Criteria Based Upon Work, Job Training or Educational Program

a) How does the Lead Agency define “working” for the purposes of eligibility? Provide a narrative description below, including allowable activities and if a minimum number of hours is required.

Reminder – Lead Agencies have the flexibility to include any work-related activities in its definition of working including periods of job search and travel time. (§§98.16(f)(3), 98.20(b))

working – Performing duties to earn a wage (for a minimum of 25 hours per week) or complete educational/job training such as practicums or internships (must be enrolled full time). Out of work parents, or parents who lose their job are allowed 60 days of job search time during which they are eligible for services.

b) Does the Lead Agency provide CCDF child care assistance to parents who are attending job training or an educational program? (§§98.16(g)(5), 98.20(b))

☒ Yes. If yes, how does the Lead Agency define “attending job training or educational program” for the purposes of eligibility? Provide a narrative description below.

Reminder – Lead Agencies have the flexibility to include any training or education-related activities in its definition of job training or education, including study time and travel time.

attending job training or educational program – Full time enrollment of any applicant in an education and/or training program resulting in any degree, diploma, or certificate designed to promote job skills and employability. Full time status is determined by the educational institution.

☐ No.

2.3.4. Eligibility Criteria Based Upon Receiving or Needing to Receive Protective Services

a) Does the Lead Agency provide child care to children in protective services? (§§98.16(f)(7), 98.20(a)(3)(ii)(A) & (B))

☒ Yes. If yes, how does the Lead Agency define “protective services” for the purposes of eligibility? Provide a narrative description below.

Reminder – Lead Agencies have the flexibility to define protective services beyond formal child welfare or foster care cases. Lead Agencies may elect to include homeless children and

other vulnerable populations in the definition of protective services.

Note – If the Lead Agency elects to provide CCDF-funded child care to children in foster care whose foster care parents are not working, or who are not in education/training activities for CCDF purposes these children are considered to be in protective services and should be included in this definition.

- *protective services* – Services provided to families in which abuse or neglect or children has occurred and a finding of substantiated abuse or neglect has been determined. The purpose of service provision is to protect children within the context of the family from further abuse or neglect.

☐ No.

b) Does the Lead Agency waive, on a case-by-case basis, the co-payment and income eligibility requirements for cases in which children receive, or need to receive, protective services? (658E(c)(3)(B), 658P(3)(C)(ii), §98.20(a)(3)(ii)(A))

☒ Yes.
☐ No.

2.3.5. Income Eligibility Criteria

a) How does the Lead Agency define “income” for the purposes of eligibility? Provide the Lead Agency’s definition of “income” for purposes of eligibility determination. (§§98.16(g)(5), 98.20(b))

income – funds received by all applicable individuals as described in policy which are not supplemented by any public assistance other than food stamps or medical assistance, and does not exceed 85 percent of the State Median Income (SMI).

b) Which of the following sources of income, if any, will the Lead Agency exclude or deduct from calculations of total family income for the purposes of eligibility determination? Check any income the Lead Agency chooses to exclude or deduct, if any.

- ☒ Adoption subsidies
- ☒ Foster care payments
- ☐ Alimony received or paid
- ☐ Child support received
- ☐ Child support paid
- ☒ Federal nutrition programs
- ☒ Federal tax credits
- ☒ State/Territory tax credits

- ☒ Housing allotments, Low-Income Energy Assistance Program (LIHEAP) or energy assistance
- ☐ Medical expenses or health insurance related expenses
- ☒ Military housing or other allotment/bonuses
- ☒ Scholarships, education loans, grants, income from work study
- ☐ Social Security Income
- ☐ Supplemental Security Income (SSI)
- ☐ Veteran's benefits
- ☒ Unemployment Insurance
- ☐ Temporary Assistance for Needy Families (TANF)
- ☐ Worker Compensation
- ☐ Other types of income not listed above _____
- ☐ None

c) Whose income will be excluded, if any, for purposes of eligibility determination? Check anyone the Lead Agency chooses to exclude, if any.

- ☐ Children under age 18
- ☐ Children age 18 and over – still attending school
- ☒ Teen parents
- ☐ Unrelated members of household
- ☒ All members of household except for parents/legal guardians
- ☒ Other Any parent/guardian who is over the age of 65.
- ☐ None

d) Provide the CCDF income eligibility limits in the table below. **Complete** columns (a) and (b) based upon maximum eligibility initial entry into the CCDF program. Complete Columns (c) and (d) **ONLY IF** the Lead Agency is using income eligibility limits lower than 85% of the SMI.

| Family Size | (a) 100% of State Median Income (SMI) (\$/month) | (b) 85% of State Median Income (SMI) (\$/month) [Multiply (a) by 0.85] | IF APPLICABLE Income Level if lower than 85% SMI | |
|-------------|---|--|---|---|
| | | | (c) \$/month | (d) % of SMI [Divide (c) by (a), multiply by 100] |
| 1 | | 0 | | |
| 2 | 3745 | 2333 | | |
| 3 | 3431 | 2916 | | |
| 4 | 4020 | 3417 | | |
| 5 | 4706 | 4000 | | |

Reminder - Income limits must be provided in terms of State Median Income (SMI) (or Territory Median Income) even if federal poverty level is used in implementing the program. (§98.20(a)(2)). [FY 2013 poverty guidelines](#) are available at hhs.gov.

e) Will the Lead Agency have “tiered eligibility” (i.e., a separate income limit at re-determination to remain eligible for the CCDF program)?

☐ Yes. If yes, **provide** the requested information from the table in 2.3.5d and **describe** _____.

Note: This information can be included in a separate table, or by placing a “/” between the entry and exit levels in the above table.

☒ No.

f) SMI Year **2004** and SMI Source **U. S. Census Bureau**

g) These eligibility limits in column (c) became or will become effective on: **October 2004**

2.3.6. Eligibility Re-determination

f) Does the State/Territory follow OCC’s 12 month re-determination recommendation? (See [Program Instruction on Continuity of Care.](#))

☒ Yes

☐ No. If no, what is the re-determination period in place for most families?

☐ 6 months

☐ 24 months

☐ Other. Describe _____

☐ Length of eligibility varies by county or other jurisdiction. Describe _____

g) **Does the Lead Agency coordinate or align re-determination periods with other programs?**

☐ Yes. If yes, **check programs that the Lead Agency aligns eligibility periods with and describe the redetermination period for each.**

☐ Head Start and/or Early Head Start Programs. Re-determination period _____

☐ Pre-kindergarten programs. Re-determination period _____

☐ TANF. Re-determination period _____

☐ SNAP. Re-determination period _____

☐ Medicaid. Re-determination period _____

☐ SCHIP. Re-determination period _____

☐ Other. Describe _____

☒ No.

- h) Describe under what circumstances, if any, a family's eligibility would be reviewed prior to redetermination. For example, regularly scheduled interim assessments, or a requirement for families to report changes.

Parents who are eligible because they are enrolled full time in an educational program must be redetermined eligible each semester/quarter. Clients who were referred from TANF, DFCS, and the home visiting program (HHM) are subject to eligibility based on the policies of the referring program.

- i) Describe any action(s) the State/Territory would take in response to any change in a family's eligibility circumstances prior to re-determination

Parents and other clients as described in the previous response would be terminated. A two-week notice of termination is provided when children are enrolled in licensed child care programs.

- j) Describe how these policies are implemented in a family-friendly manner that promotes access and continuity of care for children. (See [Information Memorandum on Continuity of Care](#) for examples). The Lead Agency has adopted the following family-friendly policies to support continuity of care:
- 12 month eligibility period
 - Any out of work parent has 60 days to engage in job search activities before losing eligibility. During that time, parent co-payments are reduced to the lowest allowable amount.
 - Income is averaged over the last two check stubs to obtain an average income. Overtime pay and bonus payments are considered irregular income and are also averaged to obtain an accurate income.
 - Children with court-ordered visitation are flagged in CCIS and remain eligible during visitation periods, even extended visitation periods.
 - The Lead Agency pays licensed providers for 15 child absences during the program year.

- f) Does the Lead Agency use a simplified process at re-determination?

- ☒ Yes. If yes, describe [During redetermination, parents are asked only to verify profile information and submit income/school enrollment verification.](#)
- ☐ No.

2.3.7. Waiting Lists

Describe the Lead Agency's waiting list status. Select **ONE** of these options.

- ☐ Lead Agency currently does not have a waiting list and:
 - ☐ All eligible families *who apply* will be served under State/Territory eligibility rules
 - ☐ Not all eligible families *who apply* will be served under State/Territory eligibility rules
- ☒ Lead Agency has an active waiting list for:
 - ☒ Any eligible family who applies when they cannot be served at the time of application
 - ☐ Only certain eligible families. Describe those families: _____
- ☐ Waiting lists are a county/local decision. Describe _____
- ☐ Other. Describe _____

2.3.8. Appeal Process for Eligibility Determinations

Describe the process for families to appeal eligibility determinations

Families who wish to have their eligibility determination reviewed, must contact the Lead Agency. Upon receipt of request for review, the Lead Agency reviews family information and responds with a final determination.

2.4. Sliding Fee Scale and Family Contribution

The statute and regulations require Lead Agencies to establish a sliding fee scale that varies based on income and the size of the family to be used in determining each family's contribution (i.e., co-payment) to the cost of child care (658E(c)(3)(B) §98.42).

2.4.1. Attach a copy of the sliding fee scale as Attachment 2.4.1.

Will the attached sliding fee scale be used in all parts of the State/Territory?

- ☒ Yes. Effective Date **October 2004**
- ☐ No. If no, attach other sliding fee scales and their effective date(s) as **Attachment 2.4.1a, 2.4.1b**, etc.

2.4.2. What income source and year will be used in creating the sliding fee scale? (658E(c)(3)(B))

Check only one option.

- ☒ State Median Income, Year: **2004**
- ☐ Federal Poverty Level, Year: _____
- ☐ Income source and year varies by geographic region. Describe income source and year: _____
- ☐ Other. Describe income source and year: _____

2.4.3. How will the family's contribution be calculated and to whom will it be applied?

Check all that the Lead Agency has chosen to use. (§98.42(b))

- ☐ Fee is a dollar amount and
 - ☐ Fee is per child with the same fee for each child
 - ☐ Fee is per child and discounted fee for two or more children
 - ☐ Fee is per child up to a maximum per family
 - ☐ No additional fee charged after certain number of children
 - ☐ Fee is per family
- ☒ Fee is a percent of income and
 - ☐ Fee is per child with the same percentage applied for each child
 - ☐ Fee is per child and discounted percentage applied for two or more children
 - ☐ No additional percentage applied charged after certain number of children
 - ☒ Fee is per family
- ☐ Contribution schedule varies by geographic area. Describe: _____
- ☐ Other. Describe _____

If the Lead Agency checked more than one of the options above, describe _____

2.4.4. Will the Lead Agency use other factors in addition to income and family size to determine each family's contribution to the cost of child care? (658E(c)(3)(B), §98.42(b))

- ☒ Yes, and describe those additional factors: [Clients who are referred for service by TANF, DFCS, and HHM receive a zero \(TANF\) or reduced co-payment amount \(DFCS & HHM\).](#)
- ☐ No.

2.4.5. The Lead Agency may waive contributions from families whose incomes are at or below the poverty level for a family of the same size. (§98.42(c)).

Select **ONE** of these options.

Reminder – Lead Agencies are reminded that the co-payments may be waived for only two circumstances - for families at or below the poverty level or on a case-by-case basis for children falling under the definition of “protective services” (as defined in 2.3.4.a).

- ☐ ALL families, including those with incomes at or below the poverty level for families of the same size, ARE required to pay a fee.
- ☐ NO families with income at or below the poverty level for a family of the same size ARE required to pay a fee. The poverty level used by the Lead Agency for a family of 3 is: \$_____

- ☒ SOME families with income at or below the poverty level for a family of the same size ARE NOT required to pay a fee. The Lead Agency waives the fee for the following families: Clients participating in an approved TANF activity.

2.5. Prioritizing Services for Eligible Children and Families

At a minimum, CCDF requires Lead Agencies to give priority for child care assistance to children with special needs, or in families with very low incomes. Prioritization of CCDF assistance services is not limited to eligibility determination (i.e., establishment of a waiting list or ranking of eligible families in priority order to be served). Lead Agencies may fulfill priority requirements in other ways such as higher payment rates for providers caring for children with special needs or waiving co-payments for families with very low incomes (at or below the federal poverty level). (658E(c)(3)(B), §98.44)

2.5.1. How will the Lead Agency prioritize child care services to children with special needs or in families with very low incomes? (658E(c)(3)(B), §98.44)

Lead Agencies have the discretion to define *children with special needs* and *children in families with very low incomes*. Lead Agencies are not limited in defining *children with special needs* to only those children with physical or mental disabilities (e.g., with a formal Individual Education Plan (IEP) required under the Individuals with Disabilities Education Act (IDEA)). Lead Agencies could consider children in the child welfare system, children of teen parents, or homeless children as examples of *children with special needs*.

| How will the Lead Agency prioritize CCDF services for: | Eligibility Priority (Check only one) | Is there a time limit on the eligibility priority or guarantee? | Other Priority Rules |
|---|---|--|--|
| Children with special needs Provide the Lead Agency definition of <i>Children with Special Needs</i> <u>Special Needs rates may be applied for children through the age of 18 who meet the SSI definition of disability by having medically proven physical or mental condition(s) that cause marked and severe functional limitations expected to last at least 12 months in duration and render the child(ren) incapable of self-care. The condition(s) must be documented by a physician. In the</u> | <input checked="" type="checkbox"/> Priority over other CCDF-eligible families <input type="checkbox"/> Same priority as other CCDF-eligible families <input type="checkbox"/> Guaranteed subsidy eligibility <input type="checkbox"/> Other. Describe _____ | <input type="checkbox"/> Yes. The time limit is: _____ <input checked="" type="checkbox"/> No | <input type="checkbox"/> Different eligibility thresholds. Describe _____ <input checked="" type="checkbox"/> Higher rates for providers caring for children with special needs requiring additional care <input type="checkbox"/> Prioritizes quality funds for providers serving these children <input type="checkbox"/> Other. |

| How will the Lead Agency prioritize CCDF services for: | Eligibility Priority (Check only one) | Is there a time limit on the eligibility priority or guarantee? | Other Priority Rules |
|---|---|--|---|
| absence of SSI benefits, medical documentation should attest to the degree of functional limitation(s) and prescribe the special care needed. | | | Describe _____ |
| Children in families with very low incomes Provide the Lead Agency definition of Children in Families with Very Low Incomes Income at or below the 50 percent of the State Median Income (SMI). | <input checked="" type="checkbox"/> Priority over other CCDF-eligible families <input type="checkbox"/> Same priority as other CCDF-eligible families <input type="checkbox"/> Guaranteed subsidy eligibility <input type="checkbox"/> Other. Describe _____ | <input type="checkbox"/> Yes. The time limit is: _____ <input checked="" type="checkbox"/> No | <input type="checkbox"/> Different eligibility thresholds. Describe _____ <input type="checkbox"/> Waiving co-payments for families with incomes at or below the Federal Poverty Level <input checked="" type="checkbox"/> Other. Describe None |

2.5.2. How will CCDF funds be used to provide child care assistance to meet the needs of families receiving Temporary Assistance for Needy Families (TANF), those attempting to transition off TANF through work activities, and those at risk of becoming dependent on TANF?

(658E(c)(2)(H), Section 418(b)(2) of the Social Security Act, §§98.50(e), 98.16(g)(4))

Reminder - CCDF requires that not less than 70 percent of CCDF Mandatory and Matching funds be used to provide child care assistance for families receiving Temporary Assistance for Needy Families (TANF), those attempting to transition off TANF through work activities, and those at risk of becoming dependent on TANF.

- ☒ Use priority rules to meet the needs of TANF families (describe in 2.5.1 or 2.5.3.)
- ☒ Waive fees (co-payments) for some or all TANF families who are below poverty level
- ☐ Coordinate with other entities (i.e. TANF office, other State/Territory agencies, and contractors)
- ☐ Other: _____

2.5.3. List and define any other eligibility conditions, priority rules and definitions that will be established by the Lead Agency. (658E(c)(3)(B), §98.16(g)(5), §98.20(b))

Reminder – Lead Agencies are reminded that any eligibility criteria and terms provided below must comply with the eligibility requirements of §98.20 and provided in section 2.2. Any priority rules provided must comply with the priority requirements of §98.44 and provided in section 2.4.1.

| Term(s) | Definition(s) |
|---------|---------------|
| | |
| | |
| | |

2.6. Parental Choice In Relation to Certificates, Grants or Contracts

The parent(s) of each eligible child who receives or is offered financial assistance for child care services has the option of either enrolling such child with a provider that has a grant or contract for the provision of service or receiving a child care certificate. (658E(c)(2)(A), §98.15(a)).

2.6.1. Child Care Certificates

a) When is the child care certificate (also referred to as voucher or authorization) issued to parents? (658E(c)(2)(A)(iii), 658P(2), §98.2, §98.30(c)(4) & (e)(1) & (2))

- ☐ Before parent has selected a provider
- ☒ After parent has selected a provider
- ☐ Other. Describe

All referred clients are supported in selecting an approved provider at the time of referral. This supports the Lead Agency in providing the fastest service possible for the state's most vulnerable populations. Non-referred clients who are determined eligible are mailed a certificate and asked to return it with provider information.

b) How does the Lead Agency inform parents that the child care certificate permits them to choose from a variety of child care categories, including child care centers, child care group homes, family child care homes, and in-home providers? (§98.30(e)(2))

- ☐ Certificate form provides information about choice of providers
- ☒ Certificate is not linked to a specific provider so parents can choose provider of choice
- ☒ Consumer education materials (flyers, forms, brochures)
- ☒ Referral to child care resource and referral agencies
- ☒ Verbal communication at the time of application
- ☐ Public Services Announcement
- ☒ Agency Website: www.childcareinfo.ms

- ☐ Community outreach meetings, workshops, other in person activities
- ☐ Multiple points of communication throughout the eligibility and renew process
- ☐ Other. Describe _____

c) What information is included on the child care certificate? **Attach a copy of the child care certificate as Attachment 2.6.1.** (658E(c)(2)(A)(iii))

- ☒ Authorized provider(s)
- ☒ Authorized payment rate(s)
- ☒ Authorized hours
- ☒ Co-payment amount
- ☒ Authorization period
- ☒ Other. Describe [Parent and child identifying information. See attachment.](#)

d) What is the estimated proportion of services that will be available for child care services through certificates?

[Approximately 75% of subsidy funds are dispersed through certificates. Remaining subsidy funds are dispersed through slots.](#)

2.6.2. Child Care Services Available through Grants or Contracts

e) In addition to offering certificates, does the Lead Agency provide child care services through grants or contracts for child care slots? (658A(b)(1), 658P(4), §§98.16(g)(1), 98.30(a)(1) & (b)). **Note:** Do not check “yes” if every provider is simply required to sign an agreement in order to be paid in the certificate program.

- ☒ Yes. If yes, **describe** the type(s) of child care services available through grants or contracts, the process for accessing grants or contracts, and the range of providers that will be available through grants or contracts: [The Lead Agency has non-competitive subgrants with various entities to provide child care slots to children and families. These subgrants are administered by the City of Jackson, City of Starkville, City of Vicksburg, Hancock County Human Resources Agency, Hinds Community College, \(Sanderson Farms, Inc., - Business Sponsored\), Midtown Partners and the United Way of the Capital Area.](#)
- ☐ No. If no, skip to 2.6.3.

b) Will the Lead Agency use grants or contracts for child care services to achieve any of the following? Check the strategies, if any, that your State/Territory chooses to implement.

- ☒ Increase the supply of specific types of care
- ☒ Programs to serve children with special needs

- ☐ Wrap-around or integrated child care in Head Start, Early Head Start, pre-k, summer or other programs
- ☒ Programs to serve infant/toddler
- ☒ School-age programs
- ☒ Center-based providers
- ☐ Family child care providers
- ☐ Group-home providers
- ☐ Programs that serve specific geographic areas
 - ☐ Urban
 - ☐ Rural
- ☐ Other. Describe _____
- ☒ Support programs in providing higher quality services
- ☒ Support programs in providing comprehensive services
- ☐ Serve underserved families. Specify: _____
- ☐ Other. Describe _____

c) Are child care services provided through grants or contracts offered throughout the State/Territory? (658E(a), §98.16(g)(3))

- ☒ Yes.
- ☐ No, and **identify** the localities (political subdivisions) and services that are not offered: _____

d) How are payment rates for child care services provided through grants/contracts determined?

All rates are based on rates published by the Lead Agency and are determined based on total budget allotment and cost of care.

e) What is the estimated proportion of direct services that will be available for child care services through grants/contracts?

Approximately 25% of subsidy funds are dispersed through grants/contracts.

2.6.3. How will the Lead Agency inform parents and providers of policies and procedures for affording parents unlimited access to their children whenever their children are in the care of a provider who receives CCDF funds? (658E(c)(2)(B), §98.31))

Check the strategies that will be implemented by your State/Territory.

- ☐ Signed declaration
- ☐ Parent Application
- ☐ Parent Orientation
- ☒ Provider Agreement
- ☐ Provider Orientation
- ☐ Other. Describe: _____

2.6.4. The Lead Agency must allow for in-home care (i.e., care provided in the child's own home) but may limit its use. (§§98.16(g)(2), 98.30(e)(1)(iv))

Will the Lead Agency limit the use of in-home care in any way?

- ☒ No
- ☐ Yes. If checked, what limits will the Lead Agency set on the use of in-home care? Check all limits the Lead Agency will establish.
- ☐ Restricted based on minimum number of children in the care of the provider to meet minimum wage law or Fair Labor Standards Act
 - ☐ Restricted based on provider meeting a minimum age requirement
 - ☐ Restricted based on hours of care (certain number of hours, non-traditional work hours)
 - ☐ Restricted to care by relatives
 - ☐ Restricted to care for children with special needs or medical condition
 - ☐ Restricted to in-home providers that meet some basic health and safety requirements
 - ☐ Other. Describe _____

2.6.5. Describe how the Lead Agency maintains a record of substantiated parental complaints about providers and makes substantiated parental complaints available to the public on request. (658E(c)(2)(C), §98.32)

The Lead Agency maintains records of provider complaints. Substantiated reports are available upon request to the Lead Agency.

2.7. Payment Rates for Child Care Services

The statute at 658E(c)(4) and the regulations at §98.43(b)(1) require the Lead Agency to establish adequate payment rates for child care services that ensure eligible children equal access to comparable care.

2.7.1 Attach a copy of your payment rates as Attachment 2.7.1.

Will the attached payment rates be used in all parts of the State/Territory?

- ☒ Yes. Effective Date: **October 2007**
- ☐ No. If no, attach other payment rates and their effective date(s) as **Attachment 2.7.1a, 2.7.1b**, etc.

2.7.2. Which strategies, if any, will the Lead Agency use to ensure the timeliness of payments?

- ☐ Policy on length of time for making payments. Describe length of time _____
- ☒ Track and monitor the payment process
- ☐ Other. Describe _____
- ☐ None

2.7.3. Market Rate Survey

Lead Agencies must complete a local Market Rate Survey (MRS) no earlier than two years prior to the effective date of the Plan (no earlier than October 1, 2011). The MRS must be completed prior to the submission of the CCDF Plan (see [Program Instruction CCDF-ACF-PI-2009-02](#) for more information on the MRS deadline).

- a) Provide the month and year when the local Market Rate Survey(s) was completed (§98.43(b)(2)): **March 2013**.
- b) Provide a **summary of the results** of the survey. The summary should include a description of the sample population, data source, the type of methodology used, response rate, description of analyses, and key findings.

The Mississippi State Department of Health (MSDH), Bureau of Licensure and Regulations, periodically provided a list of licensed child care facilities in Mississippi. The most recent populated list indicated 1,640 facilities. A list of family/in-home providers was developed using records from the Nurturing Homes Initiative (NHI) project and other MSU School of Human Sciences resources. A total of 419 family/in-home providers were identified. All 1,640 licensed centers and 419 family/in-home providers were selected for inclusion in the survey. Selected findings are provided below using frequencies, percentages, means and standard deviations. Where appropriate, comparisons are made between licensed centers and family/in-home providers.

CCDF Certificates

Overall, 3,739 licensed and family/in-home centers accept CCDF certificates. Of these 3,739 centers, 1,236 are licensed centers and 2,504 are family/in-home providers. Of the licensed centers, 747 (60.4%) are in Tier 1, 482 (39.0%) are in Tier 2, and seven (0.01%) are Tier 3. Of the family/in-home providers, 2,461 (98.2%) are in Tier 3, and 20 (0.01%) are in each Tiers 1 and 2.

Vacancies

The current MSDH licensed center list indicates there are 35,762 total vacancies of a total maximum capacity of 132,512. The NACCRRAware database shows there are 255 vacancies in family/in-home care facilities.

Weekly and Monthly Childcare Rates

Child care rates reported by licensed centers were generally higher than those reported by family/in-home providers. However, these differences were minimal across all categories of time and age. Rates reported for weekly part-time for children age five to 12 and monthly part-time for two-, three- and four-year-old children were the same for licensed centers and family/in-home providers. The 75th percentile by center type, time, and age are provided in Table 2.

2.7.4. Describe the payment rate ceilings in relation to the current MRS using the tables below.

Because of the flexibility that Lead Agencies have in setting payment rate ceilings, the following tables have been developed to simplify Lead Agency reporting on how their payment rate ceilings compare to their most recent MRS. These tables are not meant to collect comprehensive payment rate ceilings within a State/Territory and ACF recognizes that Lead Agencies are not required to set their payment rate ceilings at the 75th percentile. These tables allow Lead Agencies to use a common metric – the 75th percentile – as a reference point against which the Lead Agency can report their percentiles for three selected age groups in two geographic areas for licensed child care centers and licensed family child care homes.

In table 2.7.4a and 2.7.4b, *highest rate area* refers to the State or Territory’s area or geographic region with the highest maximum payment rate ceiling for child care centers (2.7.4a) and the lowest maximum payment rate ceiling for child care centers (2.7.4b). Identify the highest rate area in the box provided. In column (a), provide the full-time monthly rate at the 75th percentile from the most recent MRS, even if the most recent MRS is not used to set rates. In column (b), provide the maximum monthly payment rate ceiling from your CCDF payment rate table. Complete column (c) **ONLY IF** the percentile for the monthly maximum payment rate ceiling is lower than the 75th percentile of the most recent MRS.

Note - Report the “base” maximum reimbursement rate ceiling, not including any rate add-ons or tiered reimbursements. For example, if maximum reimbursement rate ceilings are tiered based on level of quality (e.g., accreditation, or rating within a quality rating system such as gold, silver and bronze), report the rates for the lowest level in the tables below (e.g., bronze), **only** if there is no lower “base” rate paid for child care services by providers **not** participating in the quality rating system.

If your State/Territory has hourly, daily and/or weekly maximum payment rate ceiling, Lead Agencies can use the following assumptions to calculate monthly maximum payment rate ceiling for column (b) – 9 hours a day, 5 days per week, 4.33 weeks per month.

OCC recognizes that States and Territories use a wide variety of age ranges and categories in setting payment rate ceilings. In these charts, report rates for the following ages only – 11 months, 59 months, and 84 months of age – regardless of what that age category may be called in your State/Territory.

| 2.7.4a – Highest Rate Area (Centers) | (a) Monthly Payment Rate at the 75th percentile from the most recent MRS | (b) Monthly Maximum Payment Rate Ceiling | (c) Percentile if lower than 75th percentile of most recent survey |
|---|--|---|--|
| | | | |

| 2.7.4a – Highest Rate Area (Centers) | (a) Monthly Payment Rate at the 75th percentile from the most recent MRS | (b) Monthly Maximum Payment Rate Ceiling | (c) Percentile if lower than 75th percentile of most recent survey |
|--|--|---|--|
| Full-Time Licensed Center Infants (11 months) | \$563 | \$346 | 70% |
| Full-Time Licensed Center Preschool (59 months) | \$476 | \$313 | 66% |
| Full-Time Licensed Center School-Age (84 months) | \$433 | \$304 | 70% |

| 2.7.4b – Lowest Rate Area (Centers) | (a) Monthly Payment Rate at the 75th percentile of the most recent MRS | (b) Monthly Maximum Payment Rate Ceiling | (c) Percentile if lower than 75th percentile of most recent survey |
|--|--|---|--|
| Full-Time Licensed Center Infants (11 months) | \$368 | \$346 | 94% |
| Full-Time Licensed Center Preschool (59 months) | \$325 | \$313 | 96% |
| Full-Time Licensed Center School-Age (84 months) | \$217 | \$304 | 140% |

In table 2.7.4c and 2.7.4d, *highest rate area* refers to the State or Territory’s area or geographic region with the highest maximum payment rate ceiling for family child care homes (2.7.4c) and the lowest maximum payment rate ceiling for family child care homes (2.7.4d). Identify the lowest rate area in the box provided. In column (a), provide the full-time monthly rate at the 75th percentile from the most recent MRS, even if the most recent MRS is not used to set rates. In column (b), provide the maximum monthly payment rate ceiling from your CCDF payment rate table. Complete column (c) ONLY IF the percentile for the monthly maximum payment rate ceiling is lower than the 75th percentile of the most recent MRS.

Note - Report the “base” maximum reimbursement rate ceilings, not including any rate add-ons or tiered reimbursement. For example, if maximum reimbursement

rate ceilings are tiered based on level of quality (e.g., accreditation, or rating within a quality rating system such as gold, silver and bronze), report the rates for the lowest level in the tables below (e.g., bronze), **only** if there is no lower “base” rate paid for child care services by providers **not** participating in the quality rating system.

If your State/Territory has hourly, daily and/or weekly maximum payment rate ceiling, Lead Agencies can use the following assumptions to calculate monthly maximum payment rate ceiling for column (b) – 9 hours a day, 5 days per week, 4.33 weeks per month.

OCC recognizes that States and Territories use a wide variety of age ranges and categories in setting payment rate ceilings. In these charts, report rates for the following ages only – 11 months, 59 months, and 84 months of age – regardless of what that age category may be called in your State/Territory.

| 2.7.4c – Highest Rate Area (FCC) | (a) Monthly Payment Rate at the 75th percentile of the most recent MRS | (b) Monthly Maximum Payment Rate Ceiling | (c) Percentile if lower than 75th percentile of most recent survey |
|---|--|---|--|
| Full-Time Licensed FCC Infants (11 months) | \$476 | \$251 | 53% |
| Full-Time Licensed FCC Preschool (59 months) | \$325 | \$227 | 70% |
| Full-Time Licensed FCC School-Age (84 months) | \$368 | \$222 | 60% |

| 2.7.4d – Lowest Rate Area (FCC) | (a) Monthly Payment Rate at the 75th percentile of the most recent MRS | (b) Monthly Maximum Payment Rate Ceiling | (c) Percentile if lower than 75th percentile of most recent survey |
|---|--|---|--|
| Full-Time Licensed FCC Infants (11 months) | \$238 | \$251 | 105% |
| Full-Time Licensed FCC Preschool (59 months) | \$173 | \$227 | 131% |
| Full-Time Licensed FCC School-Age (84 months) | \$195 | \$222 | 114% |

2.7.5. How are payment rate ceilings for license-exempt providers set?

- e) Describe how license-exempt center payment rates are set: [The Lead Agency makes no distinction between license-exempt centers and those centers that are required to have a license.](#)

- f) Describe how license-exempt family child care home payment rates are set: [Payment rates for all providers are set based on availability of funding. Consideration is given to raising rates vs. fewer certificates.](#)
- g) Describe how license-exempt group family child care home payment rates are set: [Payment rates for all providers are set based on availability of funding. Consideration is given to raising rates vs. fewer certificates.](#)
- h) Describe how in-home care payment rates are set: [Payment rates for all providers are set based on availability of funding. Consideration is given to raising rates vs. fewer certificates.](#)

2.7.6 Will the Lead Agency provide any type of tiered reimbursement or differential rates on top of its base reimbursement rates for providing care for children receiving CCDF subsidies?

Check which types of tiered reimbursement, if any, the Lead Agency has chosen to implement. In the description of any tiered rates or add-ons, indicate the process and basis used for determining the tiered rates and amount and also indicate if the rates were set based on the MRS or another process.

- ☐ Differential rate for nontraditional hours. Describe _____
- ☒ Differential rate for children with special needs as defined by the State/Territory. Describe [Providers are paid higher rates for children with special needs, if a higher rate for care of these children is charged to non-CCDF clients.](#)
- ☐ Differential rate for infants and toddlers. Describe _____
- ☐ Differential rate for school-age programs. Describe _____
- ☐ Differential rate for higher quality as defined by the State/Territory. Describe _____
- ☐ Other differential rate. Describe _____
- ☐ None.

Reminder - CCDF regulations require the Lead Agency to certify that the payment rates for the provision of child care services are sufficient to ensure equal access for eligible families to child care services comparable to those provided to families not eligible to receive CCDF assistance. In the next three questions, Lead Agencies are asked to describe how their payment policies reflect the affordable copayments for families' provision of equal access (i.e., minimizing additional fees to parents), how payment practices are implemented consistent with the general child care market to be fair to providers (see [Information Memorandum on Continuity of Care](#) for examples), and the summary of facts describing how payment rates are adequate to ensure equal access to the full range of providers.

2.7.7. What policies does the Lead Agency have regarding any additional fees that providers may charge CCDF parents? The Lead Agency...

- ☒ Allows providers to charge the difference between the maximum reimbursement rate and their private pay rate

- ☐ Pays for provider fees (e.g., registration, meals, and supplies). Describe _____
- ☐ Policies vary across region, counties and or geographic areas. Describe _____
- ☐ Other. Describe _____

2.7.8 What specific policies and practices does the Lead Agency have regarding the following:

- a) Number of absent days allowed. Describe The Lead Agency pays for 15 absence days per program year, per child. Absence days can be used for any reason deemed necessary by the family. The Lead Agency has no policy regarding the maximum number of allowable absences within a program year.
- b) Paying based on enrollment. Describe The Lead Agency pays for the care type (full time vs part time) that is assigned to the certificate, even if the child attends fewer hours than is required to determine care type on a given day. School-aged children and children attending Head Start programs are paid full time rates when full time care is needed during holidays, school breaks, and school closings.
- c) Paying on the same schedule that providers charge private pay families (e.g., hourly, weekly, monthly). Describe The Lead Agency pays all providers a daily rate, regardless of their established private pay schedule.
- d) Using electronic tools (automated billing, direct deposit, EBT cards, etc.) to make provider payments. Describe The Lead agency makes payments twice monthly to providers using a direct deposit system. Providers can elect to have their payments deposited to a pre-paid card instead of a traditional bank account.

2.7.9. Describe how payment rates are adequate to ensure equal access to the full range of providers based on the Market Rate Survey.

CCDF regulations require the Lead Agency to certify that the payment rates for the provision of child care services are sufficient to ensure equal access for eligible families to child care services comparable to those provided to families not eligible to receive CCDF assistance. To demonstrate equal access, the Lead Agency shall provide at a minimum a summary of facts describing: (§98.43(a))

- a) How a choice of the full range of providers, e.g., child care centers, family child care homes, group child care homes and in-home care, is made available (§98.43(a)(1))

The Lead Agency approves a range of care environments including licensed/unlicensed and home/center-based. The approval of the range of care environments allows for parental choice. Parents are provided with a list

of providers participating in the subsidy program in a given area upon request.

b) How payment rates are adequate based on the most recent local MRS (§98.43(a)(2))

Based on the Mississippi Child Care Market Rate Survey, which supplies information about tuition rates at licensed child care facilities in the state, MDHS DECCD adjusts payment of tier rates accordingly. The Lead Agency makes every effort to balance reimbursement rates with the number of applicants for assistance. Tier rates are evaluated every two years as a result of the Mississippi Child Care Market Rate Survey. In addition, the Mississippi Child Care Quality Step System (MCCQSS) facilitates an increase in the provider's current tier rate based upon steps attained in the MCCQSS. The increase in the tiered reimbursement is referred to as an "On-Going Quality Bonus" and the increase in tiered reimbursement does not have to be passed on to the general public.

c) How family co-payments based on a sliding fee scale are affordable (§98.43(a)(3))

Co-payments for families whose income is at or below 50% of the SMI does not exceed 6.5% of the total family income per child. Co-payments for families whose income is between 50 and below 85% of the SMI does not exceed 8% of the total family income per child.

d) Any additional facts the Lead Agency considered to determine that its payment rates ensure equal access, including how the quality of child care providers is taken into account when setting rates and whether any other methodologies (e.g., cost estimation models) are used in setting payment rates

No additional facts.

2.8 Goals for the next Biennium

In this section, Lead Agencies are asked to identify at least one goal for the upcoming biennium and are encouraged to identify no more than five priority goals total. ACF will target technical assistance efforts to help Lead Agencies achieve their goal(s). Lead Agencies may include existing goals (e.g., already identified in a State strategic plan or established by the Governor for a Lead Agency). Lead Agencies will report progress and updates on these goals in the annual Quality Performance Report (Appendix 1), including any barriers encountered.

What are the Lead Agency's goals for the administration of the CCDF subsidy program in the coming Biennium? For example, what progress does the State/Territory expect to make on continuing improved services to parents and providers, continuity of care for children, improving outreach to parents and

providers, building or expanding information technology systems, or revising rate setting policies or practices).

Note – When identifying your goals below, Lead Agencies are encouraged to begin with an action verb reflecting the desired result over the two year period (e.g., Increase, Improve, Build, Align, Implement, Review, Revise, Streamline, Expand, etc.)

| |
|---|
| Goal 1 – Review provider reimbursement rates and co-payments to determine if changes are possible that allow the Lead Agency to increase certificate distribution. |
| Goal 2 – Build a website that will provide information to parents regarding services and provider selection, including those needing information in languages other than English. |
| Goal 3 – Expand the automation of administrative processes to streamline workflow processes and allow for additional focus on customer service. |
| Goal 4 – Build an online application for service that aligns with other agency services to reduce the burden on applicants. |
| Goal 5 – Increase reports from CCIS to ensure subsidies are reaching clients as quickly and accurately as possible. |

PART 3

HEALTH AND SAFETY AND QUALITY IMPROVEMENT ACTIVITIES

In this section, Lead Agencies are asked to describe their goals and plans for implementation of child care quality improvement activities. Under the Child Care and Development Block Grant Act, Lead Agencies have significant responsibility for ensuring the health and safety of children in child care through the State/Territory's child care licensing system and establishing health and safety standards for children who receive CCDF funds. Health and safety is the foundation of quality, but is not adequate to ensure that programs and staff are competent in supporting all areas of child development and promoting school success.

Quality investments and support systems to promote continuous quality improvement of both programs and the staff who work in them are a core element of CCDF. Lead Agencies have been reporting on their efforts to support program quality improvement and professional development since their initial Plans in 1999. This section allows Lead Agencies to continue to describe the steps that they are taking toward continuous quality improvement with a goal of having high quality child care options across settings for all families. While one of the key goals for CCDF is helping more low-income children access higher quality care, the Lead Agency has the flexibility to consider its goals and strategic plans for a child care quality improvement system for all families, not just those receiving assistance under CCDF.

Part 3 is organized around a template of four key components of quality which encompass most of the quality investments and initiatives undertaken by Lead Agencies over the past decade:

5. Ensuring health and safety of children through **licensing and health and safety standards**
6. Establishing **early learning guidelines**
7. Creating pathways to excellence for child care programs through **program quality improvement activities**
8. Creating pathways to an effective, well-supported child care workforce through **professional development systems and workforce initiatives**.

For each component, Lead Agencies are asked to conduct a three-step process. First, in this section, Lead Agencies will conduct a self-assessment of their programs by responding to the questions in Part 3 that describe the current status of their efforts, using common practices and best practices to list characteristics that build off those that have been reported in previous plans. Second, Lead Agencies then are asked to identify goals for making progress during the FY 2014-2015 biennium and describe their data, performance measure and evaluation capacity for each component. Third, Lead Agencies will report progress on their goals using the Quality Performance Report which is included and described in Appendix 1. The QPR will not be submitted until December 31, 2014.

Based on information reported in past plans, it is expected that the Lead Agency will describe in these first two steps how they will continue to make systematic investments towards child care quality improvement across its early childhood and school-age spectrum – including all settings, geographic coverage and age range – that will help show progress toward these outcomes and goals. Ultimately, these child care quality improvement elements should be fully implemented and integrated. Each State/Territory is expected to fall on a continuum of progress as a result of these first two steps. Lead Agency’s individual progress will be reported using the Quality Performance Report.

3.1. Activities to Ensure the Health and Safety of Children in Child Care (Component #1)

This section is intended to collect information on how Lead Agencies meet the statutory and regulatory provisions related to licensing and health and safety requirements. The CCDBG statute and the CCDF regulations address health and safety primarily in two ways.

First, Lead Agencies shall certify that they have in effect licensing requirements applicable to child care services provided within the area served by the Lead Agency (§98.40(a)(1)). These licensing requirements need not be applied to specific types of providers of child care services (658(E)(c)(2)(E)(i). Lead Agencies must describe those licensing requirements and how they are effectively enforced. Questions related to licensing requirements are in sections 3.1.1 and 3.1.2. Second, Each Lead Agency shall certify that there are in effect, within the State or local law, requirements designed to protect the health and safety of children that are applicable to child care providers of services for which assistance is provided under CCDF. Questions related to CCDF Health and Safety requirements are in sections 3.1.3 and 3.1.4.

3.1.1. Compliance with Applicable State/Territory and Local Regulatory Requirements on Licensing

Lead Agencies shall certify that they have in effect licensing requirements applicable to child care services provided within the area served by the Lead Agency (§98.40(a)(1)). These licensing requirements need not be applied to specific types of providers of child care services (658(E)(c)(2)(E)(i). Lead Agencies must describe those licensing requirements and how they are effectively enforced.

Definition: Licensing requirements are defined as regulatory requirements, including registration or certification requirements established under State, local, or tribal law, necessary for a provider to legally operate and provide child care services in a State or locality (§98.2). This does not include registration or certification requirements solely for child care providers to be eligible to participate in the CCDF program. Those requirements will be addressed in 3.1.2.

The relationship between licensing requirements and health and safety requirements varies by State/Territory depending on how comprehensive the licensing system is. In some States and Territories, licensing may apply to the majority of CCDF-eligible providers and the licensing standards cover the three CCDF health and safety requirements so the State/Territory has few, if any, providers for whom they need to establish additional CCDF health and safety requirements. In other cases, States and Territories have elected to exempt large numbers of providers from licensing which means that those exempted providers who care for children receiving assistance from CCDF will have to meet to the CCDF health and safety requirements through an alternative process outside of licensing as defined by the State/Territory. The State/Territory may also elect to impose more stringent standards and licensing or regulatory requirements on child care providers of services for which assistance is provided under the CCDF than the standards or requirements imposed on other child care providers. (§98.40(b)(1)) (658E(c)(2)(F), §98.41).

a) Is the Lead Agency responsible for child care licensing? (§98.11(a))

☐ Yes.

☒ No. Please identify the State or local (if applicable) entity/agency responsible for licensing [The Mississippi Department of Health, Division of Child Care Licensure](#)

f) Provide a brief overview of the relationship between the licensing requirements and CCDF health and safety requirements in your State/Territory.

[Licensed Centers participating in the CCDF program must remain in compliance at all times with the Mississippi State Department of Health's "Regulations Governing Licensure of Child Care Facilities." Unlicensed child care providers are required to sign a statement of agreement to comply with policy conditions related to: Basic Health, Safety, and Nutrition Assurances for Unlicensed Child Care Providers.](#)

g) Do the State/Territory's licensing requirements serve as the CCDF health and safety requirements?

| | Center-Based Child Care | Group Home Child Care <input type="checkbox"/> N/A. Check if your State/Territory does not have group home child care. | Family Child Care | In-Home Care <input type="checkbox"/> N/A. Check if in-home care is not subject to licensing in your State/Territory. |
|--------------------------------|-------------------------------------|---|--------------------------|--|
| Yes, for all providers in this | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

| | Center-Based Child Care | Group Home Child Care <input type="checkbox"/> N/A. Check if your State/Territory does not have group home child care. | Family Child Care | In-Home Care <input type="checkbox"/> N/A. Check if in-home care is not subject to licensing in your State/Territory. |
|--|-------------------------|---|---|--|
| category | | | | |
| Yes, for some providers in this category | Describe _____ | Describe | Describe The licensing authority requires that Group Home Providers caring for 6 or fewer than 12 children be licensed. Licensing regulations surrounding health and safety apply to those providers. These providers received a minimum of 2 unannounced visits per year by the licensing agency. The Lead Agency's regulations regarding health and safety apply to providers who are unregulated and are caring for fewer than 6 children not related to the provider by the | Describe _____ |

| | Center-Based Child Care | Group Home Child Care <input type="checkbox"/> N/A. Check if your State/Territory does not have group home child care. | Family Child Care | In-Home Care <input type="checkbox"/> N/A. Check if in-home care is not subject to licensing in your State/Territory. |
|-------|--------------------------|---|---|--|
| | | | third degree. These providers are subject to regular unannounced visits by the Lead Agency. | |
| No | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Other | Describe | Describe | Describe | Describe |

d) CCDF identifies and defines four categories of care: child care centers, family child care homes, group child care homes and in-home child care providers (§98.2). The CCDF definition for each category is listed below. For each CCDF category of care, please identify which types of providers are subject to licensing and which providers are exempt from licensing in your State/Territory in the chart below. **Note: OCC recognizes that each State/Territory identifies and defines its own categories of care. OCC does not expect States/Territories to change their definitions to fit the CCDF-defined categories of care. For these questions, provide responses that closely match the CCDF categories of care but consistent with your reported 801 data.**

| CCDF Category of Care | CCDF Definition (§98.2) | Which providers in your State/Territory are subject to licensing under this CCDF category? | Are any providers in your State/Territory which fall under this CCDF category exempt from licensing? |
|-------------------------|--|---|--|
| Center-Based Child Care | Center-based child care providers are defined as a provider licensed or otherwise authorized to provide child care services for fewer than 24 hours per day per child in a non-residential setting, unless care in excess of 24 hours is due to the nature of the parent(s)' work. | Describe which types of center-based settings are subject to licensing in your State/Territory Center-based child care providers are defined as a provider licensed or otherwise authorized to provide child care services for fewer than 24 hours per day per child in a nonresidential setting, unless care in excess of 24 hours is due to the nature of the parent(s)' work. | Describe which types of center-based settings are exempt from licensing in your State/Territory The Licensing authority exempts the following providers from licensure: A. Child Care facilities which operate for no more than two (2) days a week and whose primary purpose is to provide respite for the caregiver or temporary care during other scheduled or related activities. B. Organized programs that operate for three (3) or less weeks per year such as but not limited to vacation bible schools and scout day camps. C. Any child residential home as defined in and in compliance with the provisions of Section 43-16-3 (b) et seq., Mississippi Code of 1972. D. Any program in an elementary (including kindergarten) and/or secondary school system accredited by the Mississippi State Department of Education, the Southern Association of Colleges and Schools, The Mississippi Private School Association, the American Association of Christian Schools, the Association of Christian Schools International, or a school affiliated with Accelerated Christian Education, Inc. This includes accredited pre-K3 and pre-K4 Programs. Programs serving children less than three (3) years of age must be licensed. E. Any Head Start program operating in conjunction with an elementary school system, whether it is public, private, or parochial, whose primary |

| CCDF Category of Care | CCDF Definition (§98.2) | Which providers in your State/Territory are subject to licensing under this CCDF category? | Are any providers in your State/Territory which fall under this CCDF category exempt from licensing? |
|-----------------------|-------------------------|--|--|
| | | | <p>purpose is a structured school or school readiness program. This includes Head Start pre-K3 and pre-K4 programs. Head Start programs serving children less than three (3) years of age must be licensed.</p> <p>F. Any family child care home defined in Mississippi Code Section 43-20-53 (a) et seq. To wit: An occupied residence in which shelter and personal care is regularly provided for five (5) or fewer children who are not related within the third degree computed according to the civil law to the provider and who are under 13 years of age and are provided care for any part of the twenty-four hour day. These homes may be voluntarily registered with the Mississippi State Department of Health.</p> <p>G. Any membership organization affiliated with a national organization which charges only a nominal annual membership fee, does not receive monthly, weekly, or daily payments for services, and is certified by its national association as complying with the association's minimum standards and procedures, including, but not limited to, the Boys and Girls Club of America, and the YMCA. A nominal fee is defined as \$300 or less per calendar year.</p> <p>For example, some jurisdictions exempt school-based centers, centers operated by religious organizations, summer camps, or Head Start</p> |

| CCDF Category of Care | CCDF Definition (§98.2) | Which providers in your State/Territory are subject to licensing under this CCDF category? | Are any providers in your State/Territory which fall under this CCDF category exempt from licensing? |
|--|--|--|--|
| | | | programs. |
| Group Home Child Care <input checked="" type="checkbox"/> N/A. Check if your State/Territory does not have group home child care. | Group home child care provider is defined as two or more individuals who provide child care services for fewer than 24 hours per day per child, in a private residence other than the child's residence, unless care in excess of 24 hours is due to the nature of the parent(s)' work. | Describe which types of group homes are subject to licensing | Describe which types of group homes are exempt from licensing |
| Family Child Care | Family child care provider is defined as one individual who provides child care services for fewer than 24 hours per day per child, as the sole caregiver, in a private residence other than the child's residence, unless care in excess of 24 hours is due to the nature of the parent(s)'s work. Reminder - Do not respond if family child care home providers simply must register or be certified to participate in the CCDF program separate from the State/Territory regulatory requirements. | Describe which types of family child care home providers are subject to licensing Providers caring for 6 or fewer than 12 or fewer children in the provider's home are subject to licensing requirements. | Describe which types of family child care home providers are exempt from licensing Providers caring for fewer than 6 children in their home are exempt from licensing requirements. |

| CCDF Category of Care | CCDF Definition (§98.2) | Which providers in your State/Territory are subject to licensing under this CCDF category? | Are any providers in your State/Territory which fall under this CCDF category exempt from licensing? |
|-----------------------|---|---|--|
| In-Home Care | In-home child care provider is defined as an individual who provides child care services in the child's own home. Reminder - Do not respond if in-home child care providers simply must register or be certified to participate in the CCDF program separate from the State/Territory regulatory requirements. | <input checked="" type="checkbox"/> N/A. Check if in-home care is not subject to licensing in your State/Territory. Describe which in-home providers are subject to licensing <input type="text"/> | Describe which types of in-home child care providers are exempt from licensing <input type="text"/> |

Note: In lieu of submitting or attaching licensing regulations to certify the requirements of §98.40(a)(1), Lead Agencies may provide their licensing regulations to the National Resource Center for Health and Safety in Child Care and Early Education. Please check the [NRCKid's website](#) to verify the accuracy of your licensing regulations and provide any updates to the National Resource Center. **Check this box to indicate that the licensing requirements were submitted and verified at NRCKid's.** ☒

e) **Indicate** whether your State/Territory licensing requirements include any of the following four indicators for each category of care*.

* American Academy of Pediatrics, American Public Health Association, National Resource Center for Health and Safety in Child Care and Early Education. (2011) *Caring for Our Children: National Health and Safety Performance Standards; Guidelines for Early Care and Education Programs. 3rd Edition*. Elk Grove Village, IL: American Academy of Pediatrics; Washington, DC: American Public Health Association. Available online at the [NCRKid's website](#).

| Indicator | For each indicator, check all requirements for licensing that apply, if any. | | | |
|--|---|---|--|---|
| | Center-Based Child Care | Group Home Child Care | Family Child Care | In-Home Care |
| | | <input checked="" type="checkbox"/> N/A. Check if your State/Territory does not have group home child care. | | <input checked="" type="checkbox"/> N/A if the State/Territory does not license in-home care (i.e., care in the child's own home) |
| Do the licensing requirements include child : | <input checked="" type="checkbox"/> Yes, Child: staff ratio requirement | <input type="checkbox"/> Yes, Child: staff ratio requirement | <input checked="" type="checkbox"/> Yes, Child: staff ratio requirement. List ratio requirement <input type="text"/> | <input type="checkbox"/> Yes, Child: staff ratio requirement. List ratio requirement by <input type="text"/> |

| Indicator | For each indicator, check all requirements for licensing that apply, if any. | | | |
|--|---|---|--|---|
| | Center-Based Child Care | Group Home Child Care | Family Child Care | In-Home Care |
| staff ratios and group sizes? If yes, provide the ratio for age specified. | Infant ratio (11 months): 5:1 Toddler ratio (35 months): 14:1 Preschool ratio (59 months): 16:1 <input type="checkbox"/> No ratio requirements. <input checked="" type="checkbox"/> Yes, Group size requirement Infant group size (11 months): 10 w/ 2 caregivers Toddler group size (35 months): 14 Preschool group size (59 months): 20 w 2 caregivers <input type="checkbox"/> No group size requirements. | <input checked="" type="checkbox"/> N/A. Check if your State/Territory does not have group home child care. Infant ratio (11 months): Toddler ratio (35 months): Preschool ratio (59 months): <input checked="" type="checkbox"/> No ratio requirements. <input type="checkbox"/> Yes, Group size requirement Infant group size (11 months): Toddler group size (35 months): Preschool group size (59 months): <input checked="" type="checkbox"/> No group size requirements. | by age group: <1 yr=4:1 1 yr =8:1 2 yr =12:1 3 yr =12:1 4 yr =12:1 5-9 yrs = 12:1 10-12 yrs = 12:1 <input type="checkbox"/> No ratio requirements. <input checked="" type="checkbox"/> Yes, Group size requirement. List ratio requirement by age group See above information, not to exceed 12. <input type="checkbox"/> No group size requirements. | <input checked="" type="checkbox"/> N/A if the State/Territory does not license in-home care (i.e., care in the child's own home) age group: <input type="checkbox"/> No ratio requirements. <input type="checkbox"/> Yes, Group size requirement. List ratio requirement by age group <input type="checkbox"/> No group size requirements. |

| Indicator | For each indicator, check all requirements for licensing that apply, if any. | | | |
|--|--|---|--|--|
| | Center-Based Child Care | Group Home Child Care | Family Child Care | In-Home Care |
| Do the licensing requirements identify specific educational credentials for child care directors? | <input type="checkbox"/> High school/GED <input type="checkbox"/> Child Development Associate (CDA) <input type="checkbox"/> State/ Territory Credential <input checked="" type="checkbox"/> Associate's degree <input type="checkbox"/> Bachelor's degree <input type="checkbox"/> No credential required for licensing <input type="checkbox"/> Other: | <input type="checkbox"/> N/A. Check if your State/Territory does not have group home child care. <input type="checkbox"/> High school/GED <input type="checkbox"/> Child Development Associate (CDA) <input type="checkbox"/> State/ Territory Credential <input type="checkbox"/> Associate's degree <input type="checkbox"/> Bachelor's degree <input type="checkbox"/> No credential required for licensing <input type="checkbox"/> Other: | <input type="checkbox"/> High school/GED <input type="checkbox"/> Child Development Associate (CDA) <input type="checkbox"/> State/ Territory Credential <input checked="" type="checkbox"/> Associate's degree <input type="checkbox"/> Bachelor's degree <input type="checkbox"/> No credential required for licensing <input type="checkbox"/> Other: | <input checked="" type="checkbox"/> N/A if the State/Territory does not license in-home care (i.e., care in the child's own home) <input type="checkbox"/> High school/GED <input type="checkbox"/> Child Development Associate (CDA) <input type="checkbox"/> State/ Territory Credential <input type="checkbox"/> Associate's degree <input type="checkbox"/> Bachelor's degree <input type="checkbox"/> No credential required for licensing <input type="checkbox"/> Other: |
| Do the licensing requirements identify specific educational credentials for child care teachers? | <input checked="" type="checkbox"/> High school/GED <input type="checkbox"/> Child Development Associate (CDA) <input type="checkbox"/> State/ Territory Credential <input type="checkbox"/> Associate's degree <input type="checkbox"/> Bachelor's degree <input type="checkbox"/> No credential required for licensing <input type="checkbox"/> Other: | <input type="checkbox"/> High school/GED <input type="checkbox"/> Child Development Associate (CDA) <input type="checkbox"/> State/ Territory Credential <input type="checkbox"/> Associate's degree <input type="checkbox"/> Bachelor's degree <input type="checkbox"/> No credential required for licensing <input type="checkbox"/> Other: | <input checked="" type="checkbox"/> High school/GED <input type="checkbox"/> Child Development Associate (CDA) <input type="checkbox"/> State/ Territory Credential <input type="checkbox"/> Associate's degree <input type="checkbox"/> Bachelor's degree <input type="checkbox"/> No credential required for licensing <input type="checkbox"/> Other: | <input type="checkbox"/> High school/GED <input type="checkbox"/> Child Development Associate (CDA) <input type="checkbox"/> State/ Territory Credential <input type="checkbox"/> Associate's degree <input type="checkbox"/> Bachelor's degree <input type="checkbox"/> No credential required for licensing <input type="checkbox"/> Other: |
| Do the licensing requirements specify that directors and caregivers must attain a specific number of | <input type="checkbox"/> At least 30 training hours required in first year <input type="checkbox"/> At least 24 training hours per year after first year | <input type="checkbox"/> At least 30 training hours required in first year <input type="checkbox"/> At least 24 training hours per year after first year | <input type="checkbox"/> At least 30 training hours required in first year <input type="checkbox"/> At least 24 training hours per year after first year | <input type="checkbox"/> At least 30 training hours required in first year <input type="checkbox"/> At least 24 training hours per year after first year |

| Indicator | For each indicator, check all requirements for licensing that apply, if any. | | | |
|--------------------------|---|---|---|---|
| | Center-Based Child Care | Group Home Child Care | Family Child Care | In-Home Care |
| | | <input checked="" type="checkbox"/> N/A. Check if your State/Territory does not have group home child care. | | <input checked="" type="checkbox"/> N/A if the State/Territory does not license in-home care (i.e., care in the child's own home) |
| training hours per year? | <input type="checkbox"/> No training requirement <input checked="" type="checkbox"/> Other: 15 Hours annually | <input type="checkbox"/> No training requirement <input type="checkbox"/> Other: | <input type="checkbox"/> No training requirement <input checked="" type="checkbox"/> Other: 15 hours annually | <input type="checkbox"/> No training requirement <input type="checkbox"/> Other: |

f) Do you expect the licensing requirements for child care providers to change in FY2014-2015?

- ☐ Yes. Describe
☒ No

3.1.2 Enforcement of Licensing Requirements

Each Lead Agency is required to provide a detailed description of the State/Territory's licensing requirements and how its licensing requirements are effectively enforced. (658E(c)(2)(E), §98.40(a)(2)) The Lead Agency is also required to certify that procedures are in effect to ensure that child care providers caring for children receiving CCDF services comply with the applicable health and safety requirements. (658E(c)(2)(G), §98.41(d))

Describe the State/Territory's policies for effective enforcement of the licensing requirements using questions 3.1.2a through 3.1.2e below. This description includes whether and how the State/Territory uses visits (announced and unannounced), background checks, and any other enforcement policies and practices for the licensing requirements.

a) Does your State/Territory include **announced** and/or **unannounced** visits in its policies as a way to effectively enforce the licensing requirements?

- ☒ Yes. If "Yes" please refer to the chart below and check all that apply.
☐ No

| CCDF Categories of Care | Frequency of Routine Announced Visits | Frequency of Routine Unannounced Visits |
|---|---|--|
| <input checked="" type="checkbox"/> Center-Based Child Care | <input type="checkbox"/> Once a Year <input type="checkbox"/> More than Once a Year <input type="checkbox"/> Once Every Two Years <input type="checkbox"/> Other. Describe | <input type="checkbox"/> Once a Year <input type="checkbox"/> More than Once a Year <input type="checkbox"/> Once Every Two Years <input checked="" type="checkbox"/> Other. Describe Once Twice a year, or as needed to investigate complaints. |

| CCDF Categories of Care | Frequency of Routine Announced Visits | Frequency of Routine Unannounced Visits |
|--|---|--|
| <input type="checkbox"/> Group Home Child Care <input checked="" type="checkbox"/> N/A. Check if your State/Territory does not have group home child care. | <input type="checkbox"/> Once a Year <input type="checkbox"/> More than Once a Year <input type="checkbox"/> Once Every Two Years <input type="checkbox"/> Other. Describe | <input type="checkbox"/> Once a Year <input type="checkbox"/> More than Once a Year <input type="checkbox"/> Once Every Two Years <input type="checkbox"/> Other. Describe |
| <input checked="" type="checkbox"/> Family Child Care Home | <input type="checkbox"/> Once a Year <input type="checkbox"/> More than Once a Year <input type="checkbox"/> Once Every Two Years <input type="checkbox"/> Other. Describe | <input type="checkbox"/> Once a Year <input type="checkbox"/> More than Once a Year <input type="checkbox"/> Once Every Two Years <input checked="" type="checkbox"/> Other. Describe <u>Once Twice a year, or as needed to investigate complaints.</u> |
| <input type="checkbox"/> In-Home Child Care <input checked="" type="checkbox"/> N/A. Check if In-Home Child Care is not subject to licensing in your State/Territory (skip to 3.1.2b) | <input type="checkbox"/> Once a Year <input type="checkbox"/> More than Once a Year <input type="checkbox"/> Once Every Two Years <input type="checkbox"/> Other. Describe | <input type="checkbox"/> Once a Year <input type="checkbox"/> More than Once a Year <input type="checkbox"/> Once Every Two Years <input type="checkbox"/> Other. Describe |

b) Does your State/Territory have any of the following procedures in place for effective enforcement of the licensing requirements? If procedures differ based on the category of care, please indicate how in the "Describe" box.

- ☐ Yes. If "Yes" please refer to the chart below and check all that apply.
☐ No

| Licensing Procedures | Describe which procedures are used by the State/Territory for enforcement of the licensing requirements. |
|---|---|
| The State/Territory requires providers to attend or participate in training relating to opening a child care facility prior to issuing a license. | <input checked="" type="checkbox"/> Yes. Describe <u>Mandatory trainings include: Playground Safety New Director Orientation Rules and Regulations Governing Child Care</u> <input type="checkbox"/> No. <input type="checkbox"/> Other. Describe |
| The State/Territory has procedures in place for licensing staff to inspect centers and family child care homes prior to issuing a license. | <input checked="" type="checkbox"/> An on-site inspection is conducted. <input type="checkbox"/> Programs self-certify. Describe <input type="checkbox"/> No procedures in place. <input type="checkbox"/> Other. Describe |
| Licensing staff has procedures in place to address violations found in an inspection. | <input checked="" type="checkbox"/> Providers are required to submit plans to correct violations cited during inspections. |

| | |
|--|--|
| Licensing Procedures | Describe which procedures are used by the State/Territory for enforcement of the licensing requirements. |
| | <input checked="" type="checkbox"/> Licensing staff approve the plans of correction submitted by providers. <input checked="" type="checkbox"/> Licensing staff verify correction of violation. <input checked="" type="checkbox"/> Licensing staff provide technical assistance regarding how to comply with a regulation. <input type="checkbox"/> No procedures in place. <input type="checkbox"/> Other. Describe |
| Licensing staff has procedures in place to issue a sanction to a noncompliant facility. | <input checked="" type="checkbox"/> Provisional or probationary license <input checked="" type="checkbox"/> License revocation or non-renewal <input type="checkbox"/> Injunctions through court <input checked="" type="checkbox"/> Emergency or immediate closure not through court action <input checked="" type="checkbox"/> Fines for regulatory violations <input type="checkbox"/> No procedures in place. <input type="checkbox"/> Other. Describe |
| The State/Territory has procedures in place to respond to illegally operating child care facilities. | <input checked="" type="checkbox"/> Cease and desist action <input type="checkbox"/> Injunction <input checked="" type="checkbox"/> Emergency or immediate closure not through court action <input type="checkbox"/> Fines <input type="checkbox"/> No procedures in place. <input type="checkbox"/> Other. Describe |
| The State/Territory has procedures in place for providers to appeal licensing enforcement actions. | <input checked="" type="checkbox"/> Yes. Describe Any operator who disagrees with or is aggrieved by a decision of the licensing agency concerning the suspension, revocation, or restriction of a license may appeal to the Chancery Court of the county in which the child care facility is located. The appeal shall be filed no later than 30 calendar days after the operator receives written notice of the final administrative action by the licensing agency as to the suspension, revocation, or restriction of the license. The operator shall have the burden of proving that the decision of the licensing agency was not in accordance with applicable law and these regulations. If a facility is allowed to continue to operate during the appeal process, it will remain under the regulation of the licensing agency and will be subject to all current licensure |

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| | |
|-----------------------------|--|
| Licensing Procedures | Describe which procedures are used by the State/Territory for enforcement of the licensing requirements. |
| | regulations to include, but not limited to, inspection of the facility, review of facility and children's records, submission of all required or requested documents, and payment of all applicable fees and/or monetary penalties. |
| | <input type="checkbox"/> No. |
| | <input checked="" type="checkbox"/> Other. Describe <u>Per the licensing authority, there is also an internal appeal process for provider which contains two levels. One is at the Public Health District level and the other is at the State Level.</u> |

c) Does your State/Territory use **background checks as a way to effectively enforce the licensing requirements?**

☒ Yes. If "Yes" please refer to the chart below to identify who is required to have background checks, what types of checks, and with what frequency.

☐ No

| CCDF Categories of Care | Types of Background Check | Frequency | Who is Subject to Background Checks? |
|--|--|--|---|
| <input checked="" type="checkbox"/> Center-Based Child Care | <input checked="" type="checkbox"/> Child Abuse Registry | <input checked="" type="checkbox"/> Initial Entrance into the System <input type="checkbox"/> Checks Conducted Annually <input checked="" type="checkbox"/> Other. Describe <u>Repeated every 5 years</u> | <input checked="" type="checkbox"/> Director <input checked="" type="checkbox"/> Teaching staff <input checked="" type="checkbox"/> Non-teaching staff <input type="checkbox"/> Volunteers <input checked="" type="checkbox"/> Other <u>Volunteers with over 120 hours on site.</u> |
| | <input checked="" type="checkbox"/> <input type="checkbox"/> State/Territory Criminal Background <input checked="" type="checkbox"/> Check if State/Territory background check includes fingerprints | <input checked="" type="checkbox"/> Initial Entrance into the System <input type="checkbox"/> Checks Conducted Annually <input checked="" type="checkbox"/> Other. Describe <u>Repeated every 5 years.</u> | <input checked="" type="checkbox"/> Director <input checked="" type="checkbox"/> Teaching staff <input type="checkbox"/> Non-teaching staff <input type="checkbox"/> Volunteers <input checked="" type="checkbox"/> Other <u>Volunteers with over 120 hours on site.</u> |

| CCDF Categories of Care | Types of Background Check | Frequency | Who is Subject to Background Checks? |
|---|--|--|--|
| | <input checked="" type="checkbox"/> FBI Criminal Background (e.g., fingerprint) | <input checked="" type="checkbox"/> Initial Entrance into the System <input type="checkbox"/> Checks Conducted Annually <input checked="" type="checkbox"/> Other. Describe <u>Repeated every 5 years.</u> | <input checked="" type="checkbox"/> Director <input checked="" type="checkbox"/> Teaching staff <input type="checkbox"/> Non-teaching staff <input type="checkbox"/> Volunteers <input checked="" type="checkbox"/> Other <u>Volunteers with over 120 hours on site.</u> |
| | <input checked="" type="checkbox"/> Sex Offender Registry | <input checked="" type="checkbox"/> Initial Entrance into the System <input type="checkbox"/> Checks Conducted Annually <input checked="" type="checkbox"/> Other. Describe <u>Repeated every 5 years.</u> | <input checked="" type="checkbox"/> Director <input checked="" type="checkbox"/> Teaching staff <input type="checkbox"/> Non-teaching staff <input type="checkbox"/> Volunteers <input checked="" type="checkbox"/> Other <u>Volunteers with over 120 hours on site.</u> |
| <input type="checkbox"/> Group Child Care Homes <input checked="" type="checkbox"/> N/A. Check if your State/Territory does not have group home child care. | <input type="checkbox"/> Child Abuse Registry | <input type="checkbox"/> Initial Entrance into the System <input type="checkbox"/> Checks Conducted Annually <input type="checkbox"/> Other. Describe _____ | <input type="checkbox"/> Provider <input type="checkbox"/> Non-provider residents of the home _____ |
| | <input type="checkbox"/> State/Territory Criminal Background <input type="checkbox"/> Check if the State/Territory background check includes fingerprints | <input type="checkbox"/> Initial Entrance into the System <input type="checkbox"/> Checks Conducted Annually <input type="checkbox"/> Other. Describe _____ | <input type="checkbox"/> Provider <input type="checkbox"/> Non-provider residents of the home _____ |
| | <input type="checkbox"/> FBI Criminal Background (e.g., fingerprint) | <input type="checkbox"/> Initial Entrance into the System <input type="checkbox"/> Checks Conducted Annually <input type="checkbox"/> Other. Describe _____ | <input type="checkbox"/> Provider <input type="checkbox"/> Non-provider residents of the home _____ |
| | <input type="checkbox"/> Sex Offender Registry | <input type="checkbox"/> Initial Entrance into the System <input type="checkbox"/> Checks Conducted Annually <input type="checkbox"/> Other. Describe _____ | <input type="checkbox"/> Provider <input type="checkbox"/> Non-provider residents of the home _____ |

| CCDF Categories of Care | Types of Background Check | Frequency | Who is Subject to Background Checks? |
|--|--|---|--|
| <input checked="" type="checkbox"/> Family Child Care Homes | <input checked="" type="checkbox"/> Child Abuse Registry | <input checked="" type="checkbox"/> Initial Entrance into the System <input type="checkbox"/> Checks Conducted Annually <input checked="" type="checkbox"/> Other. Describe <u>Repeated every 5 years, except for those providers who do not move, relocate, or have any gaps in service.</u> | <input checked="" type="checkbox"/> Provider <input checked="" type="checkbox"/> Non-provider residents of the home <u>All adults over the age of 18 years.</u> |
| | <input checked="" type="checkbox"/> State/Territory Criminal Background <input checked="" type="checkbox"/> Check if the State/Territory background check includes fingerprints | <input checked="" type="checkbox"/> Initial Entrance into the System <input checked="" type="checkbox"/> <input type="checkbox"/> Checks Conducted Annually <input checked="" type="checkbox"/> Other. Describe <u>Repeated every 5 years, except for those providers who do not move, relocate, or have any gaps in service.</u> | <input checked="" type="checkbox"/> Provider <input checked="" type="checkbox"/> Non-provider residents of the home <u>All adults over the age of 18 years.</u> |
| | <input checked="" type="checkbox"/> FBI Criminal Background (e.g., fingerprint) | <input checked="" type="checkbox"/> Initial Entrance into the System <input type="checkbox"/> Checks Conducted Annually <input checked="" type="checkbox"/> Other. Describe <u>Repeated every 5 years, except for those providers who do not move, relocate, or have any gaps in service. Repeated every 5 years</u> | <input checked="" type="checkbox"/> Provider <input checked="" type="checkbox"/> Non-provider residents of the home <u>All adults over the age of 18 years.</u> |
| | <input checked="" type="checkbox"/> <input type="checkbox"/> Sex Offender Registry | <input checked="" type="checkbox"/> Initial Entrance into the System <input type="checkbox"/> Checks Conducted Annually <input checked="" type="checkbox"/> Other. Describe <u>Repeated every 5 years, except for those providers who do not move, relocate, or have any gaps in service.</u> | <input checked="" type="checkbox"/> Provider <input checked="" type="checkbox"/> Non-provider residents of the home <u>All adults over the age of 18 years.</u> |

| CCDF Categories of Care | Types of Background Check | Frequency | Who is Subject to Background Checks? |
|---|--|---|---|
| <input type="checkbox"/> In-Home Child Care Providers <input checked="" type="checkbox"/> N/A. Check if In-Home Child Care is not subject to licensing in your State/Territory (skip to 3.1.2e) | <input type="checkbox"/> Child Abuse Registry | <input type="checkbox"/> Initial Entrance into the System <input type="checkbox"/> Checks Conducted Annually <input type="checkbox"/> Other. Describe _____ | <input type="checkbox"/> Provider <input type="checkbox"/> Non-provider residents of the home _____ |
| | <input type="checkbox"/> State/Territory Criminal Background <input type="checkbox"/> Check if the State/Territory background check includes fingerprints | <input type="checkbox"/> Initial Entrance into the System <input type="checkbox"/> Checks Conducted Annually <input type="checkbox"/> Other. Describe _____ | <input type="checkbox"/> Provider <input type="checkbox"/> Non-provider residents of the home _____ |
| | <input type="checkbox"/> FBI Criminal Background (e.g., fingerprint) | <input type="checkbox"/> Initial Entrance into the System <input type="checkbox"/> Checks Conducted Annually <input type="checkbox"/> Other. Describe _____ | <input type="checkbox"/> Provider <input type="checkbox"/> Non-provider residents of the home _____ |
| | <input type="checkbox"/> Sex Offender Registry | <input type="checkbox"/> Initial Entrance into the System <input type="checkbox"/> Checks Conducted Annually <input type="checkbox"/> Other. Describe _____ | <input type="checkbox"/> Provider <input type="checkbox"/> Non-provider residents of the home _____ |

h) Please **provide a brief overview** of the State/Territory's process for conducting background checks for child care. In this brief overview, include the following:

d -1) The cost associated with each type of background check conducted The licensing authority charges a fee of \$50 for each individual, for each background check.

d-2) Who pays for background checks Providers

d-3) What types of violations would make providers ineligible for CCDF? Describe Violations concerning child abuse and/or neglect.

d-4) The process for providers to appeal the Lead Agency's decision based on the background check findings. Those unlicensed providers excluded from CCDF participation due to information found on the Child Abuse and Neglect Central Registry can appeal by mailing a

letter requesting a Fair Hearing. The provider will remain excluded or allowed to participate in CCDF pending the results of that hearing.

e) If not performing visits (announced or unannounced) or background checks, describe how the State/Territory will ensure that its licensing requirements are effectively enforced per the CCDF regulations? Describe _____ The Lead Agency performs announced and unannounced visits with programs covered under the licensing authority to ensure proper compliance with program policies and requirements. (658E(c)(2)(E), §98.40(a)(2))

f) Does the State/Territory disseminate information to parents and the public, including the use of on-line tools or other “search tools,” about child care program licensing status and compliance records?

☐ Yes. Describe
☒ No

3.1.3. Compliance with Applicable State/Territory and Local Regulatory Requirements on Health and Safety

Each Lead Agency shall certify that there are in effect, within the State or local law, requirements designed to protect the health and safety of children that are applicable to child care providers of services for which assistance is provided under CCDF. Such requirements shall include the prevention and control of infectious diseases (including immunization), building and physical premises safety, and minimum health and safety training appropriate to the provider setting. These health and safety requirements apply to all providers caring for children receiving CCDF services and which also may be covered by the licensing requirements. (658E(c)(2)(F), §98.41)

☒ Check if the Lead Agency certifies that there are in effect within the State (or other area served by the Lead Agency), under State or local law, requirements designed to protect the health and safety of children; these requirements are applicable to child care providers that provide services for which assistance is made available under the Child Care and Development Fund. (658E(c)(2)(E))

a) **Describe** the Lead Agency’s health and safety requirements for prevention and control of infectious disease in effect for child care providers of services for which assistance is provided under CCDF using the table below. (658E(c)(2)(F)(i), §98.41(a)(1))

| The Lead Agency requires: | For each health and safety requirement checked, identify which providers under the CCDF category must meet the requirement. Check all that apply. | | | |
|---|---|-------------------------------------|---------------------------------|-------------------------------------|
| | Center-based child care providers | Family child care home providers | Group home child care providers | In-home child care providers |
| <input type="checkbox"/> Physical exam or health statement for providers | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| <input type="checkbox"/> Physical exam or health statement for children | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| <input checked="" type="checkbox"/> Tuberculosis check for providers | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| <input type="checkbox"/> Tuberculosis check for children | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| <input checked="" type="checkbox"/> Provider immunizations | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| <input checked="" type="checkbox"/> Child immunizations | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| <input checked="" type="checkbox"/> Hand-washing policy for providers and children | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| <input checked="" type="checkbox"/> Diapering policy and procedures | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| <input checked="" type="checkbox"/> Providers to submit a self-certification or complete health and safety checklist | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| <input checked="" type="checkbox"/> Providers to meet the requirements of another oversight entity that fulfill the CCDF health and safety requirements | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| <input type="checkbox"/> Other. Describe | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

b) **Describe** the Lead Agency's health and safety requirements for building and physical premises safety, including policies and practices to protect from environmental hazards, in effect for child care providers of services for which assistance is provided under CCDF using the table below. (658E(c)(2)(F)(ii), §98.41(a)(2))

| The Lead Agency requires: | For each health and safety requirement checked, identify which providers under the CCDF category must meet the requirement. Check all that apply. | | | |
|--|---|-------------------------------------|---------------------------------|-------------------------------------|
| | Center-based child care providers | Family child care home providers | Group home child care providers | In-home child care providers |
| <input checked="" type="checkbox"/> Fire inspection | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| <input checked="" type="checkbox"/> Building inspection | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| <input checked="" type="checkbox"/> Health inspection | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| <input checked="" type="checkbox"/> Inaccessibility of toxic substances policy | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| <input checked="" type="checkbox"/> Safe sleep policy | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

| The Lead Agency requires: | For each health and safety requirement checked, identify which providers under the CCDF category must meet the requirement. Check all that apply. | | | |
|---|---|-------------------------------------|---------------------------------|-------------------------------------|
| | Center-based child care providers | Family child care home providers | Group home child care providers | In-home child care providers |
| <input checked="" type="checkbox"/> Tobacco exposure reduction | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| <input checked="" type="checkbox"/> Transportation policy | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| <input checked="" type="checkbox"/> Providers to submit a self-certification or complete health and safety checklist | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| <input checked="" type="checkbox"/> Providers to meet the requirements of another oversight entity that fulfill the CCDF health and safety requirements | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| <input type="checkbox"/> Other. Describe | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

c) **Describe** the Lead Agency's health and safety requirements for health and safety training in effect for child care providers of services for which assistance is provided under CCDF using the table below. (658E(c)(2)(F)(iii), §98.41(a)(3)). Note: While Lead Agencies have the flexibility to define these terms, for this question, pre-service refers to any training that happens prior to a person starting or shortly thereafter (first week, etc). "On-going" would be some type of routine occurrence (e.g., maintain qualifications each year).

| CCDF Categories of Care | Health and safety training requirements | Pre-Service | On-Going |
|-------------------------|---|--|--|
| Child Care Centers | First Aid | <u>Per the licensing authority, a minimum of one adult who is First Aid certified must be present on or off site where children are presents at all times.</u> Per the licensing authority, a minimum of one adult in each classroom must be First Aid certified upon hire. | <u>Per the licensing authority, a minimum of one adult who is First Aid certified must be present on or off site where children are present at all times.</u> Per the licensing authority, a minimum of one adult in each classroom must maintain First Aid certification at all times. |
| | CPR | <u>Per the licensing authority, a minimum of one adult who is CPR</u> | <u>Per the licensing authority, a minimum of one adult who is CPR</u> |

| CCDF Categories of Care | Health and safety training requirements | Pre-Service | On-Going |
|-------------------------|---|--|---|
| | | <u>certified must be present on or off site where children are present at all times.</u> Per the licensing authority, a minimum of one adult in each classroom must be CPR certified upon hire. | <u>certified must be present on or off site where children are present at all times.</u> Per the licensing authority, a minimum of one adult in each classroom must maintain CPR certification at all times. |
| | Medication Administration Policies and Practices | <u>The Lead Agency has no requirements in addition to those issued by the Licensing Authority.</u> Suggested by licensing authority. | <u>The Lead Agency has no requirements in addition to those issued by the Licensing Authority.</u> Suggested by licensing authority. |
| | Poison Prevention and Safety | <u>The Lead Agency has no requirements in addition to those issued by the Licensing Authority.</u> Suggested by licensing authority. | <u>The Lead Agency has no requirements in addition to those issued by the Licensing Authority.</u> Suggested by licensing authority. |
| | Safe Sleep Practices including Sudden Infant Death Syndrome (SIDS) Prevention | <u>The Lead Agency has no requirements in addition to those issued by the Licensing Authority.</u> Suggested by licensing authority. | <u>The Lead Agency has no requirements in addition to those issued by the Licensing Authority.</u> Suggested by licensing authority. |
| | Shaken Baby Syndrome and abusive head trauma prevention | <u>The Lead Agency has no requirements in addition to those issued by the Licensing Authority.</u> Suggested by licensing authority. | <u>The Lead Agency has no requirements in addition to those issued by the Licensing Authority.</u> Suggested by licensing authority. |
| | Age appropriate nutrition, feeding, including support for breastfeeding | <u>The Lead Agency has no requirements in addition to those issued by the Licensing Authority.</u> Suggested by licensing authority. | <u>The Lead Agency has no requirements in addition to those issued by the Licensing Authority.</u> Suggested by licensing authority. |
| | Physical Activities | <u>The Lead Agency has no requirements in addition to those issued by the Licensing Authority.</u> Suggested by | <u>The Lead Agency has no requirements in addition to those issued by the Licensing Authority.</u> Suggested by |

| CCDF Categories of Care | Health and safety training requirements | Pre-Service | On-Going |
|-------------------------|---|--|--|
| | | licensing authority. | licensing authority. |
| | Procedures for preventing the spread of infectious disease, including sanitary methods and safe handling of foods | The licensing authority requires that personnel who prepare food be ServeSafe/TummySafe certified. The licensing authority requires that personnel who prepare food be ServeSafe/TummySafe certified upon hire. | The licensing authority requires that personnel who prepare food maintain ServeSafe/TummySafe certification. The licensing authority requires that personnel who prepare food maintain ServeSafe/TummySafe certification. |
| | Recognition and mandatory reporting of suspected child abuse and neglect | The Lead Agency has no requirements in addition to those issued by the Licensing Authority. Suggested by licensing authority. | The Lead Agency has no requirements in addition to those issued by the Licensing Authority. Suggested by licensing authority. |
| | Emergency preparedness and planning response procedures | The Lead Agency has no requirements in addition to those issued by the Licensing Authority. Suggested by licensing authority. | The Lead Agency has no requirements in addition to those issued by the Licensing Authority. Suggested by licensing authority. |
| | Management of common childhood illnesses, including food intolerances and allergies | The Lead Agency has no requirements in addition to those issued by the Licensing Authority. Suggested by licensing authority. | The Lead Agency has no requirements in addition to those issued by the Licensing Authority. Suggested by licensing authority. |
| | Transportation and child passenger safety (if applicable) | The Lead Agency has no requirements in addition to those issued by the Licensing Authority. Suggested by licensing authority. | The Lead Agency has no requirements in addition to those issued by the Licensing Authority. Suggested by licensing authority. |
| | Caring for children with special health care needs, mental health needs, and developmental disabilities in | The Lead Agency has no requirements in addition to those issued by the Licensing Authority. Suggested by licensing authority. | The Lead Agency has no requirements in addition to those issued by the Licensing Authority. Suggested by licensing authority. |

| CCDF Categories of Care | Health and safety training requirements | Pre-Service | On-Going |
|------------------------------|---|---|---|
| | compliance with the Americans with Disabilities (ADA) Act | | |
| | Child development including knowledge of developmental stages and milestones appropriate for the ages of children receiving services. | <u>The Lead Agency has no requirements in addition to those issued by the Licensing Authority.</u> Suggested by licensing authority. | <u>The Lead Agency has no requirements in addition to those issued by the Licensing Authority.</u> Suggested by licensing authority. |
| | Supervision of children | <u>The Lead Agency has no requirements in addition to those issued by the Licensing Authority.</u> Suggested by licensing authority. | <u>The Lead Agency has no requirements in addition to those issued by the Licensing Authority.</u> Suggested by licensing authority. |
| | Behavior management | <u>The Lead Agency has no requirements in addition to those issued by the Licensing Authority.</u> Suggested by licensing authority. | <u>The Lead Agency has no requirements in addition to those issued by the Licensing Authority.</u> Suggested by licensing authority. |
| | Other. Describe | Suggested by licensing authority. | Suggested by licensing authority. |
| Group Home Child Care | First Aid | The State does not have Group Home Child Care. | The State does not have Group Home Child Care. |
| | CPR | The State does not have Group Home Child Care. | The State does not have Group Home Child Care. |
| | Medication Administration Policies and Practices | The State does not have Group Home Child Care. | The State does not have Group Home Child Care. |
| | Poison Prevention and Safety | The State does not have Group Home Child Care. | The State does not have Group Home Child Care. |
| | Safe Sleep Practices including Sudden Infant Death Syndrome | The State does not have Group Home Child Care. | The State does not have Group Home Child Care. |

| CCDF Categories of Care | Health and safety training requirements | Pre-Service | On-Going |
|--|---|---|---|
| | (SIDS) Prevention | | |
| | Shaken Baby Syndrome and abusive head trauma prevention | The State does not have Group Home Child Care. | The State does not have Group Home Child Care. |
| | Age appropriate nutrition, feeding, including support for breastfeeding | The State does not have Group Home Child Care. | The State does not have Group Home Child Care. |
| | Physical Activities | The State does not have Group Home Child Care. | The State does not have Group Home Child Care. |
| | Procedures for preventing the spread of infectious disease, including sanitary methods and safe handling of foods | The State does not have Group Home Child Care. | The State does not have Group Home Child Care. |
| | Recognition and mandatory reporting of suspected child abuse and neglect | The State does not have Group Home Child Care. | The State does not have Group Home Child Care. |
| | Emergency preparedness and planning response procedures | The State does not have Group Home Child Care. | The State does not have Group Home Child Care. |
| | Management of common childhood illnesses, including food intolerances and allergies | The State does not have Group Home Child Care. | The State does not have Group Home Child Care. |
| | Transportation and child passenger safety (if applicable) | The State does not have Group Home Child Care. | The State does not have Group Home Child Care. |
| | Caring for children with | The State does not have Group Home Child Care. | The State does not have Group Home Child Care. |

| CCDF Categories of Care | Health and safety training requirements | Pre-Service | On-Going |
|--|---|---|--|
| | special health care needs, mental health needs, and developmental disabilities in compliance with the Americans with Disabilities (ADA) Act | | |
| | Child development including knowledge of developmental stages and milestones appropriate for the ages of children receiving services. | The State does not have Group Home Child Care. | The State does not have Group Home Child Care. |
| | Supervision of children | The State does not have Group Home Child Care. | The State does not have Group Home Child Care. |
| | Behavior management | The State does not have Group Home Child Care. | The State does not have Group Home Child Care. |
| | Other. Describe | | |
| Family Child Care Providers | First Aid | All licensed facilities, homes and unregulated providers are required to have at least one adult who is First Aid certified in each classroom/home at all times. All licensed facilities/homes are monitored for compliance by the licensing authority. All unregulated care providers are monitored for compliance by the Lead Agency. | Teachers/care providers in licensed facilities/homes and unregulated providers are required to maintain First Aid certification at all times. All licensed families/homes are monitored for compliance by the licensing authority. All unregulated care providers are monitored for compliance by the Lead Agency. |
| | CPR | All licensed facilities, homes and unregulated providers are required to | Teachers/care providers in licensed facilities/homes and |

| CCDF Categories of Care | Health and safety training requirements | Pre-Service | On-Going |
|-------------------------|---|--|---|
| | | have at least one adult who is CPR certified in each classroom/home at all times. All licensed facilities/homes are monitored for compliance by the licensing authority. All unregulated care providers are monitored for compliance by the Lead Agency. | unregulated providers are required to maintain CPR certification at all times. All licensed families/homes are monitored for compliance by the licensing authority. All unregulated care providers are monitored for compliance by the Lead Agency. |
| | Medication Administration Policies and Practices | <u>The Lead Agency has no requirements in addition to those issued by the licensing authority.</u> Suggested by licensing authority. | <u>The Lead Agency has no requirements in addition to those issued by the licensing authority.</u> Suggested by licensing authority. |
| | Poison Prevention and Safety | <u>The Lead Agency has no requirements in addition to those issued by the licensing authority.</u> Suggested by licensing authority. | <u>The Lead Agency has no requirements in addition to those issued by the licensing authority.</u> Suggested by licensing authority. |
| | Safe Sleep Practices including Sudden Infant Death Syndrome (SIDS) Prevention | <u>The Lead Agency has no requirements in addition to those issued by the licensing authority.</u> Suggested by licensing authority. | <u>The Lead Agency has no requirements in addition to those issued by the licensing authority.</u> Suggested by licensing authority. |
| | Shaken Baby Syndrome and abusive head trauma prevention | <u>The Lead Agency has no requirements in addition to those issued by the licensing authority.</u> Suggested by licensing authority. | <u>The Lead Agency has no requirements in addition to those issued by the licensing authority.</u> Suggested by licensing authority. |
| | Age appropriate nutrition, feeding, including support for breastfeeding | <u>The Lead Agency has no requirements in addition to those issued by the licensing authority.</u> Suggested by licensing authority. | <u>The Lead Agency has no requirements in addition to those issued by the licensing authority.</u> Suggested by licensing authority. |
| | Physical Activities | <u>The Lead Agency has no requirements in addition</u> | <u>The Lead Agency has no requirements in addition</u> |

| CCDF Categories of Care | Health and safety training requirements | Pre-Service | On-Going |
|--|---|---|---|
| | | <u>to those issued by the licensing authority.</u> Suggested by licensing authority. | <u>to those issued by the licensing authority.</u> Suggested by licensing authority. |
| | Procedures for preventing the spread of infectious disease, including sanitary methods and safe handling of foods | The licensing authority requires licensed facilities/homes ensure personnel preparing food are ServeSafe/TummySafe certified. | The licensing authority requires licensed facilities/homes ensure personnel preparing food maintain ServeSafe/TummySafe certification at all times. |
| | Recognition and mandatory reporting of suspected child abuse and neglect | <u>The Lead Agency has no requirements in addition to those issued by the licensing authority.</u> Suggested by licensing authority. | <u>The Lead Agency has no requirements in addition to those issued by the licensing authority.</u> Suggested by licensing authority. |
| | Emergency preparedness and planning response procedures | <u>The Lead Agency has no requirements in addition to those issued by the licensing authority.</u> Suggested by licensing authority. | <u>The Lead Agency has no requirements in addition to those issued by the licensing authority.</u> Suggested by licensing authority. |
| | Management of common childhood illnesses, including food intolerances and allergies | <u>The Lead Agency has no requirements in addition to those issued by the licensing authority.</u> Suggested by licensing authority. | <u>The Lead Agency has no requirements in addition to those issued by the licensing authority.</u> Suggested by licensing authority. |
| | Transportation and child passenger safety (if applicable) | <u>The Lead Agency has no requirements in addition to those issued by the licensing authority.</u> Suggested by licensing authority. | <u>The Lead Agency has no requirements in addition to those issued by the licensing authority.</u> Suggested by licensing authority. |
| | Caring for children with special health care needs, mental health needs, and developmental disabilities in | <u>The Lead Agency has no requirements in addition to those issued by the licensing authority.</u> Suggested by licensing authority. | <u>The Lead Agency has no requirements in addition to those issued by the licensing authority.</u> Suggested by licensing authority. |

| CCDF Categories of Care | Health and safety training requirements | Pre-Service | On-Going |
|-------------------------------------|---|---|---|
| | compliance with the Americans with Disabilities (ADA) Act | | |
| | Child development including knowledge of developmental stages and milestones appropriate for the ages of children receiving services. | <u>The Lead Agency has no requirements in addition to those issued by the licensing authority.</u> Suggested by licensing authority. | <u>The Lead Agency has no requirements in addition to those issued by the licensing authority.</u> Suggested by licensing authority. |
| | Supervision of children | <u>The Lead Agency has no requirements in addition to those issued by the licensing authority.</u> Suggested by licensing authority. | <u>The Lead Agency has no requirements in addition to those issued by the licensing authority.</u> Suggested by licensing authority. |
| | Behavior management | <u>The Lead Agency has no requirements in addition to those issued by the licensing authority.</u> Suggested by licensing authority. | <u>The Lead Agency has no requirements in addition to those issued by the licensing authority.</u> Suggested by licensing authority. |
| | Other. Describe | | |
| In-Home Child Care Providers | First Aid | Per the Lead Agency, all unregulated care providers are required to be First Aid certified upon approval. | Per the Lead Agency, all unregulated care providers are required to maintain First Aid certification. |
| | CPR | Per the Lead Agency, all unregulated care providers are required to be First Aid certified upon approval. | Per the Lead Agency, all unregulated care providers are required to maintain First Aid certification. |
| | Medication Administration Policies and Practices | The Lead Agency has no training requirements for In-Home Providers on this topic at this time. | The Lead Agency has no training requirements for In-Home Providers on this topic at this time. |
| | Poison Prevention and | The Lead Agency has no | The Lead Agency has no |

| CCDF Categories of Care | Health and safety training requirements | Pre-Service | On-Going |
|--|---|--|--|
| | Safety | training requirements for In-Home Providers on this topic at this time. | training requirements for In-Home Providers on this topic at this time. |
| | Safe Sleep Practices including Sudden Infant Death Syndrome (SIDS) Prevention | The Lead Agency has no training requirements for In-Home Providers on this topic at this time. | The Lead Agency has no training requirements for In-Home Providers on this topic at this time. |
| | Shaken Baby Syndrome and abusive head trauma prevention | The Lead Agency has no training requirements for In-Home Providers on this topic at this time. | The Lead Agency has no training requirements for In-Home Providers on this topic at this time. |
| | Age appropriate nutrition, feeding, including support for breastfeeding | The Lead Agency has no training requirements for In-Home Providers on this topic at this time. | The Lead Agency has no training requirements for In-Home Providers on this topic at this time. |
| | Physical Activities | The Lead Agency has no training requirements for In-Home Providers on this topic at this time. | The Lead Agency has no training requirements for In-Home Providers on this topic at this time. |
| | Procedures for preventing the spread of infectious disease, including sanitary methods and safe handling of foods | The Lead Agency has no training requirements for In-Home Providers on this topic at this time. | The Lead Agency has no training requirements for In-Home Providers on this topic at this time. |
| | Recognition and mandatory reporting of suspected child abuse and neglect | The Lead Agency has no training requirements for In-Home Providers on this topic at this time. | The Lead Agency has no training requirements for In-Home Providers on this topic at this time. |
| | Emergency preparedness and planning response procedures | The Lead Agency has no training requirements for In-Home Providers on this topic at this time. | The Lead Agency has no training requirements for In-Home Providers on this topic at this time. |
| | Management of common | The Lead Agency has no training requirements for | The Lead Agency has no training requirements for |

| CCDF Categories of Care | Health and safety training requirements | Pre-Service | On-Going |
|--------------------------------|--|--|--|
| | childhood illnesses, including food intolerances and allergies | In-Home Providers on this topic at this time. | In-Home Providers on this topic at this time. |
| | Transportation and child passenger safety (if applicable) | The Lead Agency has no training requirements for In-Home Providers on this topic at this time. | The Lead Agency has no training requirements for In-Home Providers on this topic at this time. |
| | Caring for children with special health care needs, mental health needs, and developmental disabilities in compliance with the Americans with Disabilities (ADA) Act | The Lead Agency has no training requirements for In-Home Providers on this topic at this time. | The Lead Agency has no training requirements for In-Home Providers on this topic at this time. |
| | Child development including knowledge of developmental stages and milestones appropriate for the ages of children receiving services. | The Lead Agency has no training requirements for In-Home Providers on this topic at this time. | The Lead Agency has no training requirements for In-Home Providers on this topic at this time. |
| | Supervision of children | The Lead Agency has no training requirements for In-Home Providers on this topic at this time. | The Lead Agency has no training requirements for In-Home Providers on this topic at this time. |
| | Behavior management | The Lead Agency has no training requirements for In-Home Providers on this topic at this time. | The Lead Agency has no training requirements for In-Home Providers on this topic at this time. |
| | Other. Describe <div></div> | | |

d) CCDF allows Lead Agencies to exempt relative providers (grandparents, great-grandparents, siblings if living in a separate residence, aunts, and

uncles) from these health and safety requirements. What are the Lead Agency's requirements for relative providers? (§98.41(A)(ii)(A))

- ☐ All relative providers are subject to the same health and safety requirements as described in 3.1.2a-c, as appropriate; there are no exceptions for relatives.
- ☐ Relative providers are NOT required to meet any health and safety requirements as described in 3.1.2a-c, as appropriate.
- ☒ Relative providers are subject to certain requirements. Describe the different requirements Relative providers are exempt from obtaining Immunization Forms when they only care for their relatives.

e) Provide a web address for the State/Territory's health and safety requirements, if available: Please refer to the Mississippi Child Care Payment Program Policy Manual link found at, http://www.mdhs.state.ms.us/eccd_mschildcare.html

3.1.4 Effective enforcement of the CCDF health and safety requirements.

For providers who care for children receiving CCDF assistance and who are NOT subject to the enforcement procedures described in 3.1.2 for licensed providers, please describe how the Lead Agency enforces the CCDF health and safety enforcement requirements.

The Lead Agency makes unannounced visits to monitor compliance with all program requirements throughout the program year. These visits may be conducted by Lead Agency subsidy staff, or by the MDHS Division of Program Integrity staff. During these visits, staff monitor the presence of all elements related to payment claims, operation, enrollment of children, and health and safety practices as required upon initial provider approval.

- e) Describe whether and how the Lead Agency uses on-site visits (announced and unannounced)
The Lead Agency makes annual unannounced visits to unlicensed providers to ensure compliance with required elements.
- f) Describe whether the Lead Agency uses background checks
The Lead Agency requires that providers and anyone in the home over the age of 18 submit to a Child Abuse and Neglect Criminal Background Check.
- g) Does the Lead Agency permit providers to self-certify compliance with applicable health and safety standards?
☒ Yes. If yes, what documentation, if any, is required? Describe
The Lead Agency requires that all unlicensed providers submit a checklist containing various statements related to health and safety issues related to caring for children.
☐ No

- h) Describe whether the Lead Agency uses any other enforcement policies and practices for the health and safety requirements [NA](#)

☒ Check if the Lead Agency certifies that procedures are in effect to ensure that child care providers of services for which assistance is provided under the Child Care and Development Fund comply with all applicable State or local health and safety requirements. (658E(c)(2)(G))

3.1.5. Does the State/Territory encourage or require child care programs to conduct developmental screening and referral for children participating in child care programs?

Lead Agencies are not required to conduct developmental screenings of children, but are encouraged to work with child care providers to promote screening in the areas of physical health (including vision and hearing), mental health, oral health, and developmental disabilities.

- ☐ Yes. Describe [\[redacted\]](#)
☒ No

a) If yes, are training, resources and supports offered to programs to assist them in ensuring that children receive appropriate developmental screenings?

- ☐ Yes. Describe [\[redacted\]](#)
☐ No
☐ Other. Describe [\[redacted\]](#)

b) If yes, are resources and supports provided to programs to help them understand how families are referred to indicated services and how to work with the health, mental health, and developmental disabilities agencies to support children when follow-up to screening is needed?

- ☐ Yes. Describe [\[redacted\]](#)
☐ No
☐ Other. Describe [\[redacted\]](#)

d) Does the State/Territory use developmental screening and referral tools?

- ☐ Yes. If Yes, provide the name of the tool(s) [\[redacted\]](#)
☒ No
☐ Other. Describe [\[redacted\]](#)

3.1.6 Data & Performance Measures on Licensing and Health and Safety Compliance –

What data elements, if any, does the State/Territory currently have access to related to licensing compliance? What, if any, performance measures does the Lead Agency use for ensuring health and safety? The purpose of these questions is for Lead Agencies to provide a description of their capacity to provide information, not to

require Lead Agencies to collect or report this information. For any data elements checked in (a) below, Lead Agencies may provide an optional description about the data they have access to (e.g., the Lead Agency may have data for only licensed programs, only programs caring for children receiving CCDF subsidies, only providers participating in quality improvement systems, or only for certain age groups (e.g., infants and toddlers or school-age children).

a) Data on licensing and health and safety. Indicate if the Lead Agency or another agency has access to data on:

- ☒ Number of licensed programs. Describe (optional) The Mississippi Department of Health, Division of Child Care Licensure manages this data. They report the number of licensed programs as 1,636.
- ☐ Numbers of programs operating that are legally exempt from licensing. Describe (optional) _____
- ☒ Number of programs whose licenses were suspended or revoked due to non-compliance. Describe (optional) The Mississippi Department of Health, Division of Child Care Licensure manages this data. They reported that 0 program licenses were suspended/revoked during the last fiscal year.
- ☒ Number of injuries in child care as defined by the State/Territory. Describe (optional) The Mississippi Department of Health, Division of Child Care Licensure manages this data. They report 6 incidences of injuries during the last fiscal year.
- ☒ Number of fatalities in child care as defined by the State/Territory. Describe (optional) The Mississippi Department of Health, Division of Child Care Licensure manages this data.
- ☒ Number of monitoring visits received by programs. Describe (optional) The Mississippi Department of Health, Division of Child Care Licensure manages this data. They report at least two visits to all programs that were licensed during the last fiscal year.
- ☒ Caseload of licensing staff. Describe (optional) The Mississippi Department of Health, Division of Child Care Licensure manages this data.
- ☒ Number of programs revoked from CCDF due to non-compliance with health and safety requirements. Describe (optional) The Lead Agency would manage this data. Zero (0) programs were revoked during the last fiscal year due to non-compliance with health and safety requirements.
- ☐ Other. Describe _____
- ☐ None

b) Performance measurement. What, if any, performance measures does the State/Territory use in its licensing system to monitor compliance with CCDF health and safety requirements? The licensing authority does not check for provider compliance with CCDF health and safety requirements.

c) Evaluation. What, if any, are the State/Territory's plans for evaluation

related to licensing and health and safety? Evaluation can include efforts related to monitoring implementation of an initiative, validation of standards or assessment tools, or looking at outcomes in programs or the system and may be ongoing or conducted periodically. [The Lead Agency would like to evaluate the health and safety requirements of both the subsidy program and the licensing authority to compare to national health and safety standards. This comparison would be used to evaluate those changes that are needed to increase health and safety of care environments and inform policy/regulation changes.](#)

3.1.7 Goals for the next Biennium –

In this section, Lead Agencies are asked to identify at least one goal for the upcoming biennium and are encouraged to identify no more than five priority goals total. ACF will target technical assistance efforts to help Lead Agencies achieve their goal(s). Lead Agencies may include existing goals (e.g., already identified in a State strategic plan or established by the Governor for a Lead Agency). Lead Agencies are not required to establish a goal for each sub-section of 3.1. Lead Agencies will report progress and updates on these goals in the annual Quality Performance Report (Appendix 1), including any barriers encountered.


What are the Lead Agency's goals for the licensing and health and safety system in the coming biennium? What progress does the State/Territory expect to make on core areas (e.g. licensing standards, monitoring visits or other effective enforcement, improved technical assistance, or fewer serious non-compliances?)

Note – When identifying your goals below, Lead Agencies are encouraged to begin with an action verb reflecting the desired result over the two year period (e.g., Increase, Improve, Build, Align, Implement, Review, Revise, Streamline, Expand, etc.)

| |
|--|
| Goal 1 – Increase health and safety requirements for unlicensed providers participating in CCDF to align with proposed ACF requirements. |
| Goal 2 – Increase public knowledge of licensed providers including license effective dates and any infractions. |
| Goal 3 – Build an interface between licensing and subsidy data systems to ensure consistency of data. |
| Goal 4 - |
| Goal 5 - |



CCDF has a number of performance measures that are used to track progress for key aspects of the program at the national level. These performance measures are included in budget materials submitted to Congress and other documents. Please see the [CCDF performance measures](#). A number of these performance measures rely on information reported in the State and Territorial Plans as a data source. We have

added a ruler icon  in Section 3.2 through 3.4 in order to identify the specific questions used in the performance measures. When answering these questions, Lead Agencies should ensure that their answers are accurate and complete in order to promote the usefulness and integrity of the performance measures.

3.2 Establishing Voluntary Early Learning Guidelines (Component #2)

For purposes of this section, voluntary early learning guidelines (also referred to as early learning and development standards) include the expectations for what children should know (content) and be able to do (skills) at different levels of development. These standards provide guidelines, articulate developmental milestones, and set expectations for the healthy growth and development of young children. The term *early learning guidelines* (ELGs) refers to age-appropriate developmental learning guidelines for infants and toddlers and school-age children. These early learning guidelines are voluntary because States/Territories are not required to develop such guidelines or implement them in a specified manner.

3.2.1 Has the State/Territory developed voluntary early learning guidelines for children? Check any early learning guidelines the State/Territory has developed.

- ☒ Birth-to-three
- ☒ Three-to-five
- ☐ Five years and older
- ☐ None. **Skip to 3.2.6.**

If yes, insert web addresses, where possible:

[Birth to Three: www.earlychildhood.msstate.edu;](http://www.earlychildhood.msstate.edu)

[Three to Five: www.mde.k12.ms.us](http://www.mde.k12.ms.us)

Which State/Territory agency is the lead for the early learning guidelines?

[Birth to Three: Mississippi Office of Head Start Collaboration;](#)

[Three to Five: Mississippi Department of Education](#)

3.2.2 Do the early learning guidelines cover a range of domains across physical, cognitive, and social and emotional development?

Check all that apply for each age group as applicable in the chart below. Because States vary in their domain names and which domains to include, we have used the domains identified in the Head Start Child Development and Early Learning Framework for reference purposes.

| Domains | Birth-to-Three ELGs | Three-to-Five ELGs | Five and Older ELGs |
|-------------------------------------|-------------------------------------|-------------------------------------|----------------------------|
| Physical development and health | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Social and emotional development | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Approaches to learning | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Logic and reasoning (e.g., problem- | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |

| Domains | Birth-to-Three ELGs | Three-to-Five ELGs | Five and Older ELGs |
|---|-------------------------------------|-------------------------------------|--------------------------|
| solving) | | | |
| Language development | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Literacy knowledge and skills | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Mathematics knowledge and skills | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Science knowledge and skills | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Creative arts expression (e.g., music, art, drama) | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Social studies knowledge and skills | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| English language development (for dual language learners) | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| List any domains not covered in the above _____ | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Other. Describe _____ | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

3.2.3 To whom are the early learning guidelines disseminated and in what manner?

Check all audiences and methods that your State/Territory has chosen to use in the chart below.

| | Information Dissemination | Voluntary Training | Mandatory Training |
|--|-------------------------------------|-------------------------------------|--------------------------|
| Parents in the child care subsidy system | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Parents using child care more broadly | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Practitioners in child care centers | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Providers in family child care homes | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Practitioners in Head Start | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Practitioners in Early Head Start | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Practitioners in public Pre-K program | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Practitioners in elementary schools | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Other. List _____ | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |



3.2.4 Are voluntary early learning guidelines incorporated into other parts of the child care system?

Check which ways, if any, the State/Territory incorporates its early learning guidelines into other parts of the child care system.

- ☐ To define the content of training required to meet licensing requirements
☒ To define the content of training required for program quality

improvement standards (e.g., QRIS standards)

- ☐ To define the content of training required for the career lattice or professional credential
- ☐ To require programs in licensing standards to develop curriculum/learning activities based on the voluntary ELGs
- ☐ To require programs in quality improvement standards to develop curriculum/learning activities based on the voluntary ELGs
- ☐ To develop State-/Territory –approved curricula
- ☐ Other. List
- ☐ None.



3.2.5 Are voluntary early learning guidelines and development standards aligned with into other parts of the child care system?

Check the standards, if any, with which the State/Territory aligns its early learning guidelines.

- ☒ Cross-walked to align with Head Start Child Development and Early Learning Framework
- ☒ Cross-walked to align with K-12 content standards
- ☐ Cross-walked to align with State/Territory pre-k standards
- ☐ Cross-walked with accreditation standards
- ☐ Other. List
- ☐ None.

3.2.6 Describe how your State/Territory uses ongoing assessments and measures of school readiness assessment using the following series of questions.

In this section, assessment is framed with two distinct purposes/tools – 1) ongoing assessment of children’s progress within the classroom to improve and individualize instruction (this corresponds to 3.2.6a) and 2) assessments conducted within pre-kindergarten and/or at kindergarten entry to inform policymakers about the school readiness of children across the State on a broad range of domains, used to guide program initiatives (this corresponds to 3.2.6b).

In the description for each Yes response, please include a) who administers, and b) how often assessments are conducted, and c) what assessment tools are used.

- d) Are programs required to conduct ongoing assessments of children’s progress of children using valid, reliable and age-appropriate tools aligned with the early learning guidelines or other child standards?

☐ Yes. Describe

a-1) If yes, are programs encouraged to use information from ongoing assessments to improve practice and individual children’s needs?

- ☐ Yes. Describe
- ☐ No

☐ Other. Describe

a-2) If yes, is information on child's progress reported to parents?

☐ Yes. Describe

☐ No

☐ Other. Describe

☒ No

☐ Other. Describe

e) Does the State/Territory use tools that are valid, reliable and age-appropriate to track the readiness of children within pre-kindergarten and/or as they enter kindergarten?

☐ Yes. Describe

b-1) If yes, do the tools cover the developmental domains identified in 3.2.2?

☐ Yes. Describe

☐ No

☐ Other. Describe

b-2) If yes, are the tools used on all children or samples of children?

☐ All children. Describe

☐ Samples of children. Describe

☐ Other. Describe

b-3) If yes, is the information from the school readiness measures used to target program quality improvement activities?

☐ Yes. Describe

☐ No

☐ Other. Describe

☒ No

☐ Other. Describe

f) Is school readiness information linked to the statewide longitudinal data system (SLDS, program of the Department of Education)?

☐ Yes. Describe

☒ No

☐ Not applicable. State does not have an SLDS.

3.2.7 Data & Performance Measures on Voluntary Early Learning Guidelines –

What data elements, if any, does the State/Territory have access to on the dissemination of, implementation of, or children's attainment of the early learning guidelines? What, if any, performance measures does the State/Territory use for dissemination and implementation of the early learning guidelines? The purpose of

these questions is for Lead Agencies to provide a description of their capacity to provide information, not to require Lead Agencies to collect or report this information. For any data elements checked in (a) below, Lead Agencies may provide an optional description about the data they have access to (e.g., the Lead Agency may have data for only licensed programs, only programs caring for children receiving CCDF subsidies, only providers participating in quality improvement systems, or only for certain age groups (e.g., infants and toddlers or school-age children).

a) **Data on voluntary early learning guidelines.** Indicate if the Lead Agency or another agency has access to data on:

- ☒ Number/percentage of child care providers trained on ELG's for preschool aged children. Describe (optional) The Mississippi Child Care Resource & Referral Network reports 2,823 providers were trained on preschool ELGs in the last program year.
- ☒ Number/percentage of child care providers trained on ELG's for infants and toddlers. Describe (optional) The Mississippi Child Care Resource & Referral Network reports 3,231 providers were trained on infant/toddler ELGs in the last program year.
- ☒ Number of programs using ELG's in planning for their work. Describe (optional) The Mississippi Child Care Resource & Referral Network reports 564 providers are using the ELGs in their work.
- ☐ Number of parents trained on or served in family support programs that use ELG's. Describe (optional)
- ☐ Other. Describe
- ☐ None

b) **Performance measurement.** What, if any, are the Lead Agency's performance measures related to dissemination and implementation of the early learning guidelines?

The Lead Agency funds the MSCCR&R Network. The scope of services for this contract requires that regular ongoing trainings related to each component of the ELGs are offered across the state in person and through distance learning.

c) **Evaluation.** What are the State/Territory's plans, if any, for evaluation related to early learning guidelines and the progress of children in child care? Evaluation can include efforts related to monitoring implementation of an initiative validation of standards or program assessment tools, or looking at outcomes in programs or the system and may be ongoing or conducted periodically.

The Lead Agency plans to use the SLDS to determine the number of providers currently working in childcare that have received the ELG trainings. Additionally, the Lead Agency is working with the MSCCR&R to add advanced trainings on the ELGs for those providers who have mastered

the introductory level trainings.

3.2.8 Goals for the next Biennium –

In this section, Lead Agencies are asked to identify at least one goal for the upcoming biennium. Lead Agencies are encouraged to include measurable and achievable goals. Lead Agencies may include existing goals (e.g., already identified in a State strategic plan or established by the Governor for a Lead Agency). ACF will target technical assistance efforts to help Lead Agencies achieve their goal(s). What are the Lead Agency's goals for using voluntary early learning guidelines in the coming biennium? What progress does the Lead Agency expect to make related to early learning guidelines?

Goal 1: Expand provider knowledge of the application of ELG principles by advanced training.

Goal 2: Assess the feasibility of assessing children using the developmental checklists included in the ELGs for all children in programs where they are being implemented.

3.3 Creating Pathways to Excellence for Child Care Programs through Program Quality Improvement Activities (Component #3)

Many States have chosen to use targeted quality funds and other resources to develop a systematic framework for evaluating, improving, and communicating the level of quality in early childhood programs (i.e. QRIS). States and Territories will provide a self-assessment on current program quality improvement activities by responding to questions in this section and then describe their goals for the upcoming Biennium.

For purposes of this section, States and Territories will respond according to a Quality Rating and Improvement System (QRIS) framework. QRIS refers to a systematic framework for evaluating, improving and communicating the level of quality in early childhood programs and contains five key elements:

6. Program standards
7. Supports to programs to improve quality
8. Financial incentives and supports
9. Quality assurance and monitoring
10. Outreach and consumer education

While not all States and Territories have developed or implemented a formal QRIS, all are pursuing quality improvement strategies that can be described within this framework (based upon previous CCDF Plans). Using this framework to organize this section allows States/Territories to report on their quality improvement activities systematically whether they have a QRIS or not. Over time, States and Territories are encouraged to work on linking their quality improvement initiatives and strategies across all of these elements, culminating in a comprehensive Quality Rating and Improvement System with adequate support for providers to attain higher levels of quality and transparency for parents and the community regarding the quality of child care.

a) Describe which entities are involved in planning and administering the program quality improvement activities in 3.3, including State/Territory entities and local or community level entities.

The Mississippi Child Care Quality Step System is a star-based QRIS system currently funded by state funds and CCDF Quality funds. The Mississippi State University Early Childhood Institute implements this program. The Lead Agency and MSU ECI collaborate on best practices related to this program's administration and implementation.

3.3.1 Element 1 – Program Standards

Definition – For purposes of this section, program standards refers to the expectations for quality, or quality indicators, which identify different levels of and pathways to improved quality. Minimum licensing standards and health and safety requirements provided in section 3.1 are also program standards but in this section, we focus on those standards that build upon and go beyond those minimum requirements.



a) Does your State/Territory's have quality improvement standards that include indicators covering the following areas beyond what is required for licensing? Check any indicators, if any, that your State/Territory has chosen to establish.

- ☐ Ratios and group size
- ☐ Health, nutrition and safety
- ☒ Learning environment and curriculum
- ☒ Staff/Provider qualifications and professional development
- ☒ Teacher/providers-child relationships
- ☒ Teacher/provider instructional practices
- ☒ Family partnerships and family strengthening
- ☒ Community relationships
- ☒ Administration and management
- ☐ Developmental screenings
- ☐ Child assessment for the purposes of individualizing instruction and/or targeting program improvement
- ☒ Cultural competence
- ☐ Other. Describe
- ☐ None. If checked, skip to 3.3.2.

b) Does your State/Territory have quality improvement standards with provisions about the care of any of these groups of children? Check any provisions your State/Territory has chosen to establish.

- ☐ Children with special needs as defined by your State/Territory
- ☐ Infants and toddlers
- ☐ School-age children
- ☐ Children who are dual language learners

☐ None

c) How do your State/Territory's quality standards link to State/Territory licensing requirements? Check any links between your State/Territory's quality standards and licensing requirements.

- ☒ Licensing is a pre-requisite for participation
☒ Licensing is the first tier of the quality levels
☐ State/Territory license is a "rated" license.
☐ Other. Describe
☐ Not linked.

d) Do your State/Territory's quality improvement standards align with or have reciprocity with any of the following standards? Check any alignment, if any, between your State/Territory's quality standards and other standards.

- ☐ Programs that meet State/Territory pre-k standards are able to meet all or part of the quality improvement standards (e.g., content of the standards is the same, or there is a reciprocal agreement between pre-k and the quality improvement system)
☐ Programs that meet Federal Head Start Performance Standards are able to meet all or part of the quality improvement standards (e.g., content of the standards is the same, or there is a reciprocal agreement between Head Start and the quality improvement system)
☐ Programs that meet national accreditation standards are able to meet all or part of the quality improvement standards (e.g., content of the standards is the same, or an alternative pathway to meeting the standards)
☐ Other. Describe
☐ None

3.3.2 Element 2 –Supports to Programs to Improve Quality

Definition – For purposes of this section, supports to programs to improve quality refers to such activities as technical assistance and consultation services for programs to assist in meeting child care quality improvement standards.



a) Check which types of and for what purposes the State/Territory uses supports to child care programs, if any, in the following chart. If none, skip to 3.3.3.

| Types and Purposes of Support | Information or Written Materials | Training | On-Site Consultation |
|--|-------------------------------------|-------------------------------------|-------------------------------------|
| <input type="checkbox"/> Attaining and maintaining licensing compliance | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| <input checked="" type="checkbox"/> Attaining and maintaining quality improvement standards beyond licensing | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> |

| Types and Purposes of Support | Information or Written Materials | Training | On-Site Consultation |
|---|----------------------------------|-------------------------------------|-------------------------------------|
| <input type="checkbox"/> Attaining and maintaining accreditation | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| <input checked="" type="checkbox"/> Providing targeted technical assistance in specialized content areas: | | | |
| Health and safety | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> |
| Infant/toddler care | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> |
| School-age care | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> |
| Inclusion | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> |
| Teaching dual language learners | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> |
| Mental health | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> |
| Business management practices | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> |
| Other. Describe | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| <input type="checkbox"/> None. Skip to 3.3.3. | | | |

b) Methods used to customize quality improvement supports to the needs of individual programs include:

- ☒ Program improvement plans
- ☒ Technical assistance on the use of program assessment tools
- ☐ Other. Describe

c) Is technical assistance linked to entering the QRIS or targeted to help programs forward on QRIS?

- ☒ Yes. Describe The MS Child Care Resource and Referral Network, Partners for Quality Care, and the Allies for Quality Care program provide onsite technical assistance designed to improve a licensed program's rating in the QRIS.
- ☐ No
- ☐ Other. Describe

3.3.3 Element 3 – Financial Incentives and Supports

Definition – For purposes of this section, financial incentives refers to the types of monetary supports offered to programs in meeting and sustaining licensing and QRIS or other child care quality improvement standards for programs.



a) Identify which types of financial incentives are offered and to which providers in the following chart. Check which incentives and supports, if any, the State/Territory chooses to offer. If none, skip to 3.3.4.

| Types of Financial Incentives and Supports for Programs | Child Care Centers | Child Care Homes | License-Exempt Providers |
|---|-------------------------------------|--------------------------|---------------------------------|
| <input type="checkbox"/> Grants to programs to meet or maintain licensing | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| <input type="checkbox"/> Grants to programs to meet QRIS or similar quality level | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| <input type="checkbox"/> One-time awards or bonuses on completion of quality standard attainment | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| <input checked="" type="checkbox"/> Tiered reimbursement tied to quality for children receiving subsidy | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| <input type="checkbox"/> On-going, periodic grants or stipends tied to improving/maintaining quality | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| <input type="checkbox"/> Tax credits tied to meeting program quality standards | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| <input type="checkbox"/> Other. Describe | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| <input type="checkbox"/> None. Skip to 3.3.4. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

3.3.4 – Element 4 - Quality Assurance and Monitoring

Definition – For purposes of this section, quality assurance and monitoring refers to the ways that the State/Territory measures program quality for the purposes of its QRIS or other quality improvement system and the methods for measuring that the child care quality improvement standards for programs are met initially and maintained over time.



a) What tools, if any, does the State/Territory use to measure and monitor the quality of programs? Check all that apply and briefly describe using the chart below, including which programs are required to participate and the frequency of assessments. **If none, skip to 3.3.5.**

| Types of Program Quality Assessment Tools | Child Care Centers | Child Care Homes | License-Exempt Providers |
|--|--|--------------------------|---------------------------------|
| <input checked="" type="checkbox"/> Environment Rating Scales (e.g., ECERS, ITERS, SACERS, FDCRS) Describe, including frequency of assessments. Pre/Post | <input checked="" type="checkbox"/> Infant/Toddler <input checked="" type="checkbox"/> Preschool <input type="checkbox"/> School-Age | <input type="checkbox"/> | <input type="checkbox"/> |
| <input type="checkbox"/> Classroom Assessment Scoring System (CLASS) Describe, including frequency of assessments. | <input type="checkbox"/> | N/A | <input type="checkbox"/> |
| <input type="checkbox"/> Program Administration Scale (PAS) for child care centers or Business Administration Scale (BAS) for family child care homes | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

| Types of Program Quality Assessment Tools | Child Care Centers | Child Care Homes | License-Exempt Providers |
|--|--------------------------|--------------------------|--------------------------|
| Describe, including frequency of assessments. [redacted] | | | |
| <input type="checkbox"/> Customized instrument, including submission of written documentation, developed for State/Territory quality improvement system. This may include instruments developed for quality improvements in 21 st Century Learning Center programs Describe, including frequency of assessments. [redacted] | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| <input type="checkbox"/> Other. Describe [redacted] | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| <input type="checkbox"/> None. Skip to 3.3.5. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

b) What steps, if any, has the State/Territory taken to align quality assurance and monitoring across funding streams and sectors in order to minimize duplication?

- ☒ Have a mechanism to track different quality assessments/monitoring activities to avoid duplication
- ☐ Include QRIS or other quality reviews as part of licensing enforcement
- ☐ Have compliance monitoring in one sector (e.g., Head Start/Early Head Start, State/Territory pre-k) serve as validation for compliance with quality improvement system (e.g., QRIS) without further review
- ☐ Have monitoring for meeting accreditation standards serve as validation for compliance with quality improvement system (e.g., QRIS) without further review
- ☐ Other. Describe [redacted]
- ☐ None

3.3.5 – Element 5 - Outreach and Consumer Education

Definition – For purposes of this section, outreach and consumer education refers to the strategies used to promote the child care quality improvement standards to parents, programs and the general public.



a) Does the State/Territory use symbols or simple icons to communicate levels of quality for child care programs beyond what may communicated to parents about licensing status and licensing compliance as reported in 3.1.3? (e.g. stars, or gold/silver/bronze levels).

- ☒ Yes. If yes, how is it used?

- ☒ Resource and referral/consumer education services use with parents seeking care
- ☐ Parents enrolling in child care subsidy are educated about the system and the quality level of the provider that they are selecting
- ☒ Searchable database on the web
- ☒ Voluntarily, visibly posted in programs
- ☐ Mandatory to post visibly in programs
- ☐ Used in marketing and public awareness campaigns
- ☐ Other. Describe
- ☐ No. If no, skip to 3.3.6.

b) Does the State/Territory use any forms of media to reach parents and the public to communicate about levels of quality for child care programs? Check which forms, if any, the State/Territory uses to communicate levels of quality for child care programs.

- ☒ Print
- ☐ Radio
- ☐ Television
- ☒ Web
- ☐ Telephone
- ☐ Social Marketing
- ☐ Other. Describe
- ☐ None

c) Describe any targeted outreach for culturally and linguistically diverse families.

The Lead Agency has developed print media to illustrate what a quality child care environment looks like through photographs and very few words. This is designed for non-English speaking parents and low literacy parents.

3.3.6. Quality Rating and Improvement System (QRIS)



a) **Based on the five key elements of a QRIS described above in 3.3.1 through 3.3.5**, does your State/Territory have a quality rating and improvement system (QRIS) or similar quality improvement system in place?

- ☒ Yes, the State/Territory has a QRIS or similar quality improvement system that includes linked activities in all five elements operating State/Territory-wide.
 - ☒ Participation is voluntary for All licensed child care providers.
 - ☐ Participation is mandatory for _____
- ☐ Yes, the State/Territory has a QRIS or similar quality improvement system that includes linked activities in all five elements operating as a pilot or in a few localities but not State/Territory-wide.

- ☐ No, the State/Territory does not have a QRIS or similar quality improvement system that includes linked activities in all five elements.
- ☐ State/Territory is in the development phase
- ☐ State/Territory has no plans for development
- ☐ Other. Describe



b) If yes to 3.3.6a, **CHECK** the types of providers eligible to participate in the QRIS:

- ☒ Child care centers
- ☐ Group child care homes
- ☐ Family child care homes
- ☐ In-home child care
- ☐ License exempt providers
- ☐ Early Head Start programs
- ☒ Head Start programs
- ☒ Pre-kindergarten programs
- ☐ School-age programs
- ☐ Other. Describe

3.3.7. If the State/Territory has or will have any quality improvement strategies for targeted groups of providers (e.g., relative caregivers or caregivers who are legally exempt from licensing) that are not described in your responses to any question in section 3.3 above, please describe

At this time, the Lead Agency is working with the Mississippi State University Extension Service to pilot a QRIS program for out-of-school programs and for family child care providers.

3.3.8 Data & Performance Measures on Program Quality –

What data elements, if any, does the State/Territory currently have access to related to the quality of programs? What, if any, does the State/Territory use for performance measures on program quality improvement? The purpose of these questions is for Lead Agencies to provide a description of their capacity to provide information, not to require Lead Agencies to collect or report this information. For any data elements checked in (a) below, Lead Agencies may provide an optional description about the data they have access to (e.g., the Lead Agency may have data for only licensed programs, only programs caring for children receiving CCDF subsidies, only providers participating in quality improvement systems, or only for certain age groups (e.g., infants and toddlers or school-age children).

a) **Data on program quality.** Indicate if the Lead Agency or another agency has access to data on:

- ☒ Data on the quality level for individual programs (e.g. QRIS level) as defined by your State/Territory. Describe (optional)
- ERS software currently tracks all QRIS program activity. This data is housed at the Mississippi State University Early Childhood Institute.

- ☐ Number of programs that move program quality levels annually (up or down). Describe (optional) _____
- ☐ Program scores on program assessment instruments. List instruments: _____ Describe (optional) _____
- ☒ Classroom scores on program assessment instruments. List instruments: **ITERS-R & ECERS-R** Describe (optional) _____
- ☒ Qualifications for teachers or caregivers within each program. Describe (optional) _____
- This information is maintained by the Professional Development registry housed at the MS Child Care Resource & Referral Network**
- ☒ Number/Percentage of children receiving CCDF assistance in licensed care. Describe (optional) **The Lead Agency houses this information in CCIS.**
- ☒ Number/percentage of children receiving CCDF assistance who attend care at each of the tiers of the quality as defined by the State/Territory **The Lead Agency houses this information in CCIS.**
- ☒ Number/Percentage of programs receiving financial assistance to meet higher program standards. Describe (optional) **The Lead Agency houses this information in CCPS.**
- ☐ Other. Describe _____
- ☐ None

b) Performance measurement. What, if any, are the Lead Agency's performance measures on program quality?

The Lead Agency supports providers in their efforts to improve program quality. The Lead Agency considers a score of 3.0 on either the ITERS-r or ECERS-R to indicate basic/minimal levels of quality.

c) Evaluation. What, if any, are the State/Territory's plans for evaluation related to program quality? Evaluation can include efforts related to monitoring implementation of an initiative, validation of standards or assessment tools, or looking at outcomes in programs or the system and may be ongoing or conducted periodically.

The Lead Agency is funding the evaluation and validation of the QRIS in the upcoming year. The resulting information will be made to identify strategies to improve QRIS implementation and increase program quality.

3.3.9 Goals for the next Biennium –

In this section, Lead Agencies are asked to identify at least one goal for the upcoming biennium. Lead Agencies are encouraged to include measurable and achievable goals. Lead Agencies may include existing goals (e.g., already identified in a State strategic plan or established by the Governor for a Lead Agency). ACF will target technical assistance efforts to help Lead Agencies achieve their goal(s). Lead Agencies are not required to establish a goal for each sub-section in 3.3. What are the State/Territory's goals for the program quality improvement system in the coming biennium? What progress does the State/Territory expect to make across the five key elements for quality improvement systems?

Goal 1: Assess the overall functioning of the QRIS.

Goal 2: Increase parental knowledge about provider quality ratings.

3.4 Pathways to Excellence for the Workforce – Professional Development Systems and Workforce Initiatives (Component #4)

Pathways to excellence for the workforce builds on the significant investments States and Territories have made in the area of professional development systems to ensure a well-qualified workforce with opportunities for growth from entry level through master teacher, with an increasing emphasis on the many additional roles in the child care system (e.g. adult educators such as consultants, technical assistance providers, trainers, and higher education faculty). In this section, States and Territories provide a self-assessment on current professional development and workforce activities and describe their goals for the upcoming Biennium.

For purposes of this section, States and Territories will respond according to five key elements for workforce systems:

- 1) Core Knowledge and Competencies
 - 2) Career Pathways (or Career Lattice)
 - 3) Professional Development Capacity
 - 4) Access to Professional Development
 - 5) Compensation, Benefits and Workforce Conditions
- a) Describe which entities are involved in planning and administering the activities in Section 3.4, including State/Territory entities and local or community level entities.

Mississippi is beginning to engage in discussions surrounding these activities through the work of the Mississippi Early Childhood Advisory Council. At this time the Lead Agency supports access to professional development by funding the Mississippi Child Care Resource and Referral Network and other programs to offer professional development training offered at no cost to participants.

3.4.1 Workforce Element 1 - Core Knowledge and Competencies

Definition – For purposes of this section, core knowledge and competencies (CKCs) refers to the expectations for what the workforce should know (content) and be able to do (skills) in their role working with and/or on behalf of children and their families. These CKCs provide a foundation for professional development design (including instructional practices) and other quality improvement efforts.



- a) Has the State/Territory developed core knowledge and competencies (CKCs) for practitioners working with and/or on behalf of children?

☐ Yes

☒ No, the State/Territory has not developed core knowledge and competencies. Skip to question 3.4.2.

☐ Other. Describe

If yes, insert web addresses, where possible:

b) Check which of the following teaching and learning topics, if any, are covered in the CKCs.

- ☐ Child growth, development and learning
- ☐ Health, nutrition, and safety
- ☐ Learning environment and curriculum
- ☐ Interactions with children
- ☐ Family and community relationships
- ☐ Professionalism and leadership
- ☐ Observation and assessment
- ☐ Program planning and management
- ☐ Diversity
- ☐ Other. Describe
- ☐ None

c) Are the CKCs incorporated into other parts of the child care system? Check which ways, if any, the State/Territory incorporates its CKCs into other parts of the child care system.

- ☐ To define the content of training required to meet licensing requirements
- ☐ To define the content of training required for program quality improvement standards (as reported in section 3.3)
- ☐ To define the content of training required for the career lattice or credential
- ☐ To correspond to the early learning guidelines
- ☐ To define curriculum and degree requirements at institutions of higher education
- ☐ Other. Describe
- ☐ None

d) Are the CKCs aligned with other State/Territory or national standards? Check which ways, if any, the State/Territory aligns its CKCs with other standards.

- ☐ Cross-walked with the Child Development Associate (CDA) competencies
- ☐ Cross-walked with national teacher preparation standards (e.g., NAEYC standards for early childhood professional preparation, National Board of Professional Teaching Standards, National Council for Accreditation of Teacher Education/Council for the Accreditation of Educator Preparation, Head Start SOLAR staff skills indicators)
- ☐ Cross-walked with apprenticeship competencies
- ☐ Other. Describe
- ☐ None

e) Check for which roles, if any, the State/Territory developed supplemental or specialized competencies.

- ☐ Staff working directly with children in centers, including aides, assistants, teachers, master teachers. Describe _____
- ☐ Providers working directly with children in family child care homes, including aides and assistants. Describe _____
- ☐ Administrators in centers (including educational coordinators, directors). Describe _____
- ☐ Technical assistance providers (including mentors, coaches, consultants, home visitors, etc.). Describe _____
- ☐ Education and training staff (such as trainers, CCR&R staff, faculty). Describe _____
- ☐ Other. Describe _____
- ☐ None

f) Check if the State/Territory has developed any supplemental or specialized competencies for practitioners/providers working with the following ages.

- ☐ Birth-to-three
- ☐ Three-to-five
- ☐ Five and older
- ☐ Other. Describe _____
- ☐ None

3.4.2 Workforce Element 2 - Career Pathways

Definition – For purposes of this section, career pathways (or career lattice) defines the options and sequence of qualifications and ongoing professional development to work with children. Career pathways assist professionals in understanding their career options and identify steps for advancement for the workforce recognizing and rewarding higher levels of preparation and mastery of practice to promote higher quality services for children.



a) Does the State/Territory have a career pathway which defines the sequence of qualifications related to professional development (education, training and technical assistance) and experience required to work with children?

- ☐ Yes. Describe _____
- ☒ No, the State/Territory has not developed a career pathway. Skip to question 3.4.3.

Insert web addresses, where possible: _____

b) Check for which roles, if any, the career pathways include qualifications, specializations or credentials.

- ☐ Staff working directly with children in centers, including aides, assistants, teachers, master teachers. Describe _____
- ☐ Providers working directly with children in family child care homes, including aides and assistants. Describe _____
- ☐ Administrators in centers (including educational coordinators, directors). Describe _____
- ☐ Technical assistance providers (including mentors, coaches, consultants, home visitors, etc.). Describe _____
- ☐ Education and training staff (such as trainers, CCR&R staff, faculty). Describe _____
- ☐ Other. Describe _____
- ☐ None

c) Does the career pathways (or lattice) include specializations or credentials, if any, for working with any of the following children?

- ☐ Infants and toddlers
- ☐ Preschoolers
- ☐ School-age children
- ☐ Dual language learners
- ☐ Children with disabilities, children with developmental delays, and children with other special needs
- ☐ Other. Describe _____
- ☐ None

d) In what ways, if any, is the career pathway (or lattice) used?

- ☐ Voluntary guide and planning resource
- ☐ Required placement for all practitioners and providers working in programs that are licensed or regulated in the State/Territory to serve children birth to 13
- ☐ Required placement for all practitioners working in programs that receive public funds to serve children birth to 13
- ☐ Required placement for adult educators (i.e., those that provide training, education and/or technical assistance)
- ☐ Required placement for participation in scholarship and/or other incentive and support programs
- ☐ Required placement for participation in the QRIS or other quality improvement system
- ☐ Other. Describe _____
- ☐ None

e) Are individuals' qualifications, professional development, and work experience verified prior to placement on the career pathway (or lattice)?

- ☐ Yes. If yes, describe _____
- ☐ No

3.4.3 Workforce Element 3 – Professional Development Capacity

Definition – For purposes of this section, professional development incorporates higher education, training and technical assistance. Higher education capacity refers to capability of the higher education system to meet the needs of the diverse workforce including the provision of content that addresses the full range of development and needs of children. Training and technical assistance capacity refers to capability of the training and technical assistance system to meet the needs of the diverse workforce including the provision of content that addresses the full range of development and needs of children. Early childhood includes infants, toddlers and preschoolers.



a) Has the State/Territory assessed the availability of degree programs in early-childhood education, school-age care or youth development, and related fields in the State/Territory (e.g., both physical location and distance-based, accessibility to practitioners, etc.)?

- ☐ Yes. If yes, describe
- ☒ No



b) Has the State/Territory assessed the availability of early-childhood and school-age and related training and technical assistance programs in the State/Territory (e.g., both physical location and distance-based, degree level, etc.)?

- ☐ Yes. If yes, describe
- ☒ No

c) What quality assurance mechanisms, if any, are in place for the degree programs and courses offered by the State/Territory institutions?

- ☒ Standards set by the institution
- ☒ Standards set by the State/Territory higher education board
- ☐ Standards set by program accreditors
- ☐ Standards set by State/Territory departments of education
- ☐ Standards set by national teacher preparation accrediting agencies
- ☐ Other. Describe
- ☐ None

d) What quality assurance mechanisms, if any, are in place for the training and technical assistance programs offered by the State/Territory?

- ☐ Training approval process. Describe
- ☒ Trainer approval process. Describe All T&TA staff are evaluated by supervisors monthly.
- ☐ Training and/or technical assistance evaluations. Describe
- ☐ Other. Describe
- ☐ None

e) Does the State/Territory have articulation agreements in place across and within institutions of higher education?

- ☐ Yes. If yes, describe
☒ No

f) Does the State/Territory have articulation agreements that translate training and/or technical assistance into higher education credit?

- ☐ Yes. If yes, describe
☒ No

3.4.4 Workforce Element 4 – Access to Professional Development

Definition – For purposes of this section, access to professional development (training, education and technical assistance) refers to the degree to which practitioners are made aware of, and receive supports and assistance to utilize, professional development opportunities.



a) Does the State/Territory have professional development opportunities accessible for professionals in various or all sectors of the early childhood and school-age field?

- ☒ Yes. If yes, for which sectors?
☒ Child care
☒ Head Start/Early Head Start
☒ Pre-Kindergarten
☐ Public schools
☒ Early intervention/special education
☐ Other. Describe
☐ No

b) Does the State/Territory have a State/Territory-wide, coordinated and easily accessible clearinghouse of information about professional development opportunities available to all members of the early childhood and school-age workforce? Lead Agencies are not required to have a professional development system, but States/Territories may develop such clearinghouses to promote access to professional development opportunities.

- ☒ Yes. If yes, describe
[This information is disseminated through the Mississippi Child Care Resource and Referral Network.](#)
☐ No

Insert web addresses, where possible: www.msucares.com/childcare

c) What supports, if any, does the State/Territory provide to promote access to training and education activities?

- ☒ Scholarships. Describe Scholarships are offered to providers in order to attain a CDA
- ☒ Free training and education. Describe All training and technical assistance is offered free of charge to all participants.
- ☐ Reimbursement for training and education expenses. Describe
- ☐ Grants. Describe
- ☐ Loans. Describe
- ☐ Loan forgiveness programs. Describe
- ☐ Substitute pools. Describe
- ☐ Release time. Describe
- ☐ Other. Describe
- ☐ None

d) Does the State/Territory have career advisors for early childhood and school-age practitioners?

- ☐ Yes. If yes, describe
- ☒ No

e) Does the State/Territory have mentors, coaches, consultants, and/or other specialists available to provide technical assistance to the workforce?

- ☒ Yes. If yes, describe
The Lead Agency funds several programs that provide mentoring and coaching to the workforce. Programs include the MS Child Care Resource and Referral Network, Allies for Quality Care, CDA Scholarship Program, Nurturing Homes Initiative, Partners for Quality Care and Project PREPARE.
- ☐ No

3.4.5 Workforce Element 5- Compensation, Benefits and Workforce Conditions

Definition – For purposes of this section, rewards for education and training refers to any financial supports provided to practitioners for participating in and completing education or training or for increasing compensation.



a) Does the State/Territory have a salary or wage scale for various professional roles?

- ☐ Yes. If yes, describe
- ☒ No



b) Does the State/Territory provide financial rewards for participation in professional development, such as one-time salary bonuses for completing a training or education program?

- ☒ Yes. If yes, describe **One time bonuses are provided to individuals who complete their Child Development Associate certification through the use of SAC Head Start ARRA funds.**
- ☐ No



c) Does the State/Territory provide sustained financial support on a periodic, predictable basis, such as annual wage supplements, based on the highest level of training and education achieved?

- ☐ Yes. If yes, describe
- ☒ No

d) Does the State/Territory have a program to offer or facilitate benefits (e.g. health insurance coverage, retirement, etc.) to the workforce?

- ☐ Yes. If yes, describe
- ☒ No

3.4.6 Data & Performance Measures on the Child Care Workforce –

What data elements, if any, does the State/Territory currently have access to related to the child care workforce? What, if any, does the State/Territory use for performance measures on professional development and workforce initiatives? The purpose of these questions is for Lead Agencies to provide a description of their capacity to provide information, not to require Lead Agencies to collect or report this information. For any data elements checked in (a) below, Lead Agencies may provide an optional description about the data they have access to (e.g., the Lead Agency may have data for only licensed programs, only programs caring for children receiving CCDF subsidies, only providers participating in quality improvement systems, or only for certain age groups (e.g., infants and toddlers or school-age children).

a) **Data on the child care workforce.** Indicate if the Lead Agency or another agency has access to data on:

- ☒ Data on the size of the child care workforce. Describe (optional)
- ☐ Data on the demographic characteristics of practitioners or providers working directly with children. Describe (optional)
- ☒ Records of individual teachers or caregivers and their qualifications. Describe (optional)
- ☐ Retention rates. Describe (optional)
- ☐ Records of individual professional development specialists and their qualifications. Describe (optional)
- ☐ Qualifications of teachers or caregivers linked to the programs in

- which they teach. Describe (optional) _____
- ☒ Number of scholarships awarded . Describe (optional) _____
- ☐ Number of individuals receiving bonuses or other financial rewards or incentives. Describe (optional) _____
- ☐ Number of credentials and degrees conferred annually. Describe (optional) _____
- ☐ Data on T/TA completion or attrition rates. Describe (optional) _____
- ☐ Data on degree completion or attrition rates. Describe (optional) _____
- ☐ Other. Describe _____
- ☐ None

b) Does the State/Territory have a workforce data system, such as a workforce registry, which tracks workforce demographics, compensation, and qualifications and ongoing professional development for practitioners working with children birth to age 13?

Definition– For purposes of this section, a workforce data system refers to a system, such as a workforce registry, that tracks the size and characteristics of the child care workforce, including longitudinal data to monitor changes over time. The data system also can produce records to validate and verify qualifications or ongoing professional development for licensing, accreditation, QRIS, wage incentives, and credentials.

☐ Yes.

b-1) If yes, which roles are included in the workforce data system? For each role checked, indicate in your description whether participation is voluntary or mandatory.

- ☐ Staff working directly with children in centers, including aides, assistants, teachers, master teachers. Describe _____
- ☐ Providers working directly with children in family child care homes, including aides and assistants. Describe _____
- ☐ Administrators in centers (including educational coordinators, directors). Describe _____
- ☐ Technical assistance providers (including mentors, coaches, consultants, home visitors, etc.). Describe _____
- ☐ Education and training staff (such as trainers, CCR&R staff, faculty). Describe _____
- ☐ Other. Describe _____
- ☐ None

b-2) Does the workforce data system apply to:

- ☐ all practitioners working in programs that are licensed

or regulated by the State/Territory to serve children birth to 13?

☐ all practitioners working in programs that receive public funds to serve children birth to age 13?

☒ No

c) **Performance measurement.** What, if any, performance measures does the State/Territory use related to its workforce and professional development systems?

The Lead Agency is currently participating in the work of the State Early Childhood Advisory Council. This Council has taken on workforce development as one of its priorities.

d) **Evaluation.** What, if any, are the State/Territory's plans for evaluation related to its workforce and professional development systems? Evaluation can include efforts related to monitoring implementation of an initiative, validation of standards or assessment tools, or looking at outcomes in programs or the system and may be ongoing or conducted periodically.

The Lead Agency is dedicated to the continued development of a comprehensive, functional professional development system in Mississippi.

3.4.7 Goals for the next Biennium –

In this section, Lead Agencies are asked to identify at least one goal for the upcoming biennium and are encouraged to identify no more than five priority goals total. ACF will target technical assistance efforts to help Lead Agencies achieve their goal(s). Lead Agencies may include existing goals (e.g., already identified in a State strategic plan or established by the Governor for a Lead Agency). Lead Agencies are not required to establish a goal for each sub-section in 3.4. Lead Agencies will report progress and updates on these goals in the annual Quality Performance Report (Appendix 1), including any barriers encountered.

What are the State/Territory's goals for the building the professional development system and improving conditions for the workforce in the coming biennium? What progress does the State/Territory expect to make across the five key elements for the workforce and professional development system described above?

Note – When identifying your goals below, Lead Agencies are encouraged to begin with an action verb reflecting the desired result over the two year period (e.g., Increase, Improve, Build, Align, Implement, Review, Revise, Streamline, Expand, etc.)

| |
|---|
| Goal 1 – Improve functionality of a professional development tracking system that allows for greater knowledge about the workforce. |
| Goal 2 – Determine retention rates of professionals in the workforce with a degree. |
| Goal 3 – Build a single system for trainers and technical assistants in all Lead Agency funded programs to use. |

Goal 4 – Initiate efforts to develop standards and competencies for trainers and technical assistants.

Goal 5 – Review data related to training and technical assistance programs to identify gaps, and opportunities for expansion of support.

AMENDMENTS LOG

CHILD CARE AND DEVELOPMENT FUND PLAN FOR: _____
FOR THE PERIOD: 10/1/11 – 9/30/12

Lead Agencies are required to request approval from Administration for Children and Families (ACF) whenever a “substantial” change in the Lead Agency’s approved CCDF plan occurs. Please refer to the [ACF Program Instruction regarding CCDF Plan amendments](#) for more information.

Plan amendments must be submitted to ACF within 60 days of the effective date of the change. Under the regulation, the plan amendment must be approved no later than the 90th day following the date on which the amendment is received by ACF unless the Lead Agency and ACF mutually agree in writing to extend the period. (§98.18 (b)).

ACF encourages Lead Agencies to contact the Child Care program staff in the appropriate ACF Regional Office to discuss any proposed amendment as early as possible.

Instructions for Submitting Amendments:

Complete the first 3 columns of the Amendment Log and send a copy of the Log (showing the latest amendment sent to ACF) and the amended section(s) to the ACF Regional Office contact. Lead Agency also should indicate the Effective Date of the amended section in the footer at the bottom of the amended page(s). A copy of the Log, showing the latest amendment pending in ACF, is retained as part of the Lead Agency's Plan.

ACF will complete column 4 and returns a photocopy of the Log to the grantee following its review and approval of the amendment. The Lead Agency replaces this page in the Plan with the copy of the Log received from ACF showing the approval date.

Note: This process depends on repeated subsequent use of the same Log page over the life of the Plan. At any time the Log should reflect all amendments, both approved and pending in ACF. The Lead Agency is advised to retain "old" plan pages that are superseded by amendments in a separate appendix to its Plan. This is especially important as auditors will review CCDF Plans and examine effective date of changes.

APPENDIX 1

QUALITY PERFORMANCE REPORT

This annual report will be submitted to ACF no later than December 31, 2014 and will reflect the period October 1, 2013 through September 30, 2014. Lead Agencies will leave this report blank when the Plan is initially submitted.

In this report, Lead Agencies are asked about the State/Territory's progress in meetings its goals as reported in the FY 2014-2015 CCDF Plan, and provide available data on the results of those activities. At a minimum, Lead Agencies are expected to respond to the first question in each section of the Quality Performance Report (QPR) which asks for their progress toward meeting their goal(s) articulated in Part 2 and Part 3 of the CCDF Plan for this Biennium.

Because of the flexibility in administering the CCDF program, it is expected that Lead Agencies may not have information and data available to respond to all questions. A Describe box is provided for each question for Lead Agencies to provide descriptive context for data reported and narrative updates in each data section, including any plans for reporting data in the future, if actual data is not currently available or if specific questions are not applicable. Lead Agencies may use data collected by other agencies and entities (e.g., CCR&R agencies or other contractors) as appropriate. The term Lead Agency is used in questions when the data relate to a CCDF-specific activity, otherwise the term State/Territory is used when another entity may be responsible or involved with an activity (e.g., licensing).

The purpose of this annual report is to capture State/Territory progress on improving the quality of child care. Specifically, this report will:

- Provide a national assessment of State's and Territory's progress toward improving the quality of child care, including a focus on program quality and child care workforce quality;
- Track State's and Territory's annual progress toward meeting high quality indicators and benchmarks, including those that they set for themselves in their CCDF Plans and those that are of interest to the U.S. Department of Health and Human Services in measuring CCDF program performance;
- Assist national and State/Territory technical assistance efforts to help States/Territories make strategic use of quality funds; and
Assist with program accountability

This report collects progress on the five goals identified in Part 2 and Part 3 of the Child Care and Development Fund (CCDF) Plan for FY2014-2015 along with key data in relation to the four components of child care quality used as a quality framework in Part 3 of the Child Care and Development Fund Plan for FY 2014-2015:

5. Ensuring health and safety of children through licensing and health and safety

- standards
6. Establishing early learning guidelines
 7. Creating pathways to excellence for child care programs through program quality improvement activities
 8. Creating pathways to an effective, well-supported child care workforce through professional development systems and workforce initiatives.

Ensuring the Health and Safety of Children (Component #1)

In this section, Lead Agencies provide information on the minimum health and safety standards and activities in effect over the past year as of September 30, 2014.

A1.1 Progress on Overall Goals

Based on the goals described in the Lead Agency's CCDF Plan at Section 3.1.7, please report your progress using the chart below.

You may include any significant areas of progress that were not anticipated in the Plan, as well. For each goal listed, briefly describe the improvement with specific examples or numeric targets where possible (e.g., revised licensing regulation to include elements related to SIDS prevention, lowered caseload of licensing staff to 1:50, or increased monitoring visits to twice annually for child care centers). If applicable, describe any barriers to implementing your planned goals.

| Goals Described in FY 2014-2015 CCDF Plan | Describe Progress – Include Examples and Numeric Targets where Possible |
|---|---|
| | |
| | |

Note: If your licensing standards changed during this period, please provide a brief summary of the major changes and submit the updated regulations to the [National Resource Center for Health and Safety in Child Care](#). _____

A1.2 Key Data

OCC is collecting this information as one part of our overall effort to better understand States/Territories' activities to improve the quality of child care. OCC recognizes that the data requested in this report will only provide part of that picture because there are many factors which affect the data being collected here and that some data requested may be collected by another agency or entity other than the Lead Agency. Each State/Territory's policy context and priorities and standards will play a role in the way that quality improvement activities are developed and implemented. For example, the number of programs with licensing violations will be

affected by how stringent the licensing standards are. States with more stringent standards may be more likely to report more violations than those with less stringent licensing standards. OCC intends to work with the States/Territories to gather any additional contextual information necessary in order to fully understand the context of these data for any reporting activities involving this information.

A1.2.1 Number of Programs

- c) How many licensed center-based programs operated in the State/Territory as of September 30, 2014? _____
☐ N/A
Describe: _____
- d) How many licensed home-based programs operated in the State/Territory as of September 30, 2014? _____
☐ N/A
Describe: _____
- c) Does the State/Territory have data on the number of programs operating in the State/Territory that are legally exempt from licensing? At a minimum, the Lead Agency should provide the number of legally exempt providers serving children receiving CCDF.
- ☐ Yes. If yes, include the number of programs as of September 30, 2014 and describe _____ (Use the Describe Box to provide the universe of programs on which the number is based)
- ☐ No. Describe: _____

A1.2.2 Number and Frequency of Monitoring Visits

For licensed programs, a monitoring visit is an onsite visit by department personnel to a licensed child care program with the goal of ensuring compliance with licensing regulations. This may include initial licensing determination visits, licensing renewal visits, periodic announced or unannounced visits, and visits made after a complaint is lodged. For legally exempt providers, a monitoring visit is an onsite visit to a child care program with the goal of ensuring compliance with health and safety standards as defined by CCDF and required for receipt of CCDF funds. Use the Describe box to provide your State/Territory monitoring visit requirement.

- c) How many licensed center-based programs received at least one monitoring visit between October 1, 2013 and September 30, 2014?
- _____
- a-1) Of those programs visited, how many were unannounced? _____
- a-2) Of those programs visited, how many were triggered by a complaint or identified risk? _____
- a-3) What percentage of required visits for licensed center-based program were completed? _____
- ☐ N/A
Describe: _____

d) How many licensed family child care programs received at least one monitoring visit between October 1, 2013 and September 30, 2014?

b-1) Of those programs visited, how many were unannounced? _____

b-2) Of those programs visited, how many were triggered by a complaint or identified risk? _____

b-3) What percentage of required visits for licensed family child care programs were completed? _____

☐ N/A

Describe: _____

c) How many legally exempt providers receiving CCDF received at least one monitoring visit between October 1, 2013 and September 30, 2014? Of those,

c-1) Of those programs visited, how many were unannounced? _____

c-2) Of those programs visited, how many were triggered by a complaint or identified risk? _____

c-3) What percentage of required visits for legally exempt providers were completed? _____

☐ N/A

Describe: _____

A1.2.3 Number of Licensing Suspensions, Licensing Revocations and Terminations from CCDF

Suspension of license includes any enforcement action that requires the temporary suspension of child care services because of licensing violations. Revocation of license includes termination or non-renewal of licensure and any other enforcement action that requires the closure of a program because of licensing violations.

| | How many programs had their licenses suspended due to licensing violations as defined in your State/Territory during the last fiscal year? | How many programs had their licenses revoked due to licensing violations as defined in your State/Territory during the last fiscal year? | How many programs were terminated from participation in CCDF due to failure to meet licensing or minimum CCDF health and safety requirements during the last fiscal year? | N/A | Describe |
|-------------------------------|--|--|---|--------------------------|----------|
| Child Care Centers | _____ | _____ | _____ | <input type="checkbox"/> | _____ |
| Group Child Care Homes | _____ | _____ | _____ | <input type="checkbox"/> | _____ |

| | How many programs had their licenses suspended due to licensing violations as defined in your State/Territory during the last fiscal year? | How many programs had their licenses revoked due to licensing violations as defined in your State/Territory during the last fiscal year? | How many programs were terminated from participation in CCDF due to failure to meet licensing or minimum CCDF health and safety requirements during the last fiscal year? | N/A | Describe |
|--------------------------------|--|--|---|--------------------------|----------------------|
| Family Child Care Homes | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="checkbox"/> | <input type="text"/> |
| In-Home Providers | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="checkbox"/> | <input type="text"/> |

A1.2.5 How many previously license-exempt providers were brought under the licensing system during the last fiscal year? _____

☐ N/A

Describe:

A1.2.6 How many injuries as defined by the State/Territory occurred in child care during the last year?

Please provide your definition of injuries in the Describe box and indicate the universe of programs on which the number is based (e.g., licensed providers, CCDF providers, or all providers). _____

☐ N/A

Describe:

A1.2.7 How many fatalities occurred in child care or as the result of a child care accident or injury as of the end of the last year?

Please indicate the universe of programs on which the number is based (e.g., licensed providers, CCDF providers, or all providers). _____

☐ N/A

Describe:

Establishing Early Learning Guidelines (Component #2)

A2.1 Progress on Overall Goals

A2.1.1 Did the State/Territory make any changes to its voluntary early learning guidelines (including guidelines for school-age children) as reported in 3.2 during the last fiscal year?

☐ Yes. Describe _____

☐ No

A2.1.2 Based on the goals described in the Lead Agency's CCDF Plan at Section 3.2.8, please report your progress.

You may include any significant areas of progress that that were not anticipated in the Plan, as well. For each goal listed, briefly describe the improvement with specific examples or numeric targets where possible (e.g., Expanded the number of programs trained on using the ELG's, Aligned the ELG's with Head Start Child Development and Early Learning Framework). If applicable, describe any barriers to implementing your planned goals.

| Goals Described in FY 2014-2015 CCDF Plan | Describe Progress – Include Examples and Numeric Targets where Possible |
|---|---|
| | |
| | |

A2.2 Key Data

OCC is collecting this information as one part of our overall effort to better understanding State/Territory activities to improve the quality of child care. OCC recognizes that the data requested in this report will only provide part of that picture because there are many factors which affect the data being collected here. Each State/Territory's policy context and priorities and standards will play a role in the way that quality improvement activities are developed and implemented. OCC intends to work with the States/Territories to gather any additional contextual information necessary in order to fully understand the context of these data for any reporting activities involving this information.

A2.2.1a How many individuals were trained on early learning guidelines (ELG's) or standards over the last fiscal year?

Responses to this question should be consistent with information provided in question 3.2.3 in the CCDF Plan.

| Provider Categories | Birth to Three ELG's | Three-to-Five ELG's | Five and Older ELG's | N/A | Describe |
|--|----------------------|---------------------|----------------------|--------------------------|----------|
| How many teachers/practitioners in center-based programs were trained on ELG's over the past year? Separate by age group if possible (e.g., infants and toddlers, preschoolers, school-age children) | _____ | _____ | _____ | <input type="checkbox"/> | _____ |

| Provider Categories | Birth to Three ELG's | Three-to-Five ELG's | Five and Older ELG's | N/A | Describe |
|--|-----------------------------|----------------------------|-----------------------------|--------------------------|-----------------|
| How many family child care providers were trained on ELG's over the past year? Separate by age group if possible (e.g., infants and toddlers, preschoolers, school-age children) | _____ | _____ | _____ | <input type="checkbox"/> | _____ |
| How many legally exempt providers were trained on ELG's over the past year? Separate by age group if possible (e.g., infants and toddlers, preschoolers, school-age children) | _____ | _____ | _____ | <input type="checkbox"/> | _____ |

A2.2.1b How many children are served in programs implementing the ELG's?

Refer to question 3.2.4 in the CCDF Plan for examples of how ELG's can be implemented in programs. Program capacity can be used as an estimate of children served.

| Provider Categories | Birth to Three ELG's | Three-to-Five ELG's | Five and Older ELG's | N/A | Describe |
|---|-----------------------------|----------------------------|-----------------------------|--------------------------|-----------------|
| How many children are served in center-based programs implementing the ELG's? Separate by age group if possible (e.g., infants and toddlers, preschoolers, school-age children) | _____ | _____ | _____ | <input type="checkbox"/> | _____ |
| How many children are served in family child care program implementing the ELG's? Separate by age group if possible (e.g., infants and toddlers, preschoolers, school-age children) | _____ _____ | _____ _____ | _____ _____ | <input type="checkbox"/> | _____ |
| How many children are served in legally exempt programs implementing the ELG's? Separate by age group if possible (e.g., infants and toddlers, preschoolers, school- | _____ _____ | _____ _____ | _____ _____ | <input type="checkbox"/> | _____ |

| Provider Categories | Birth to Three ELG's | Three-to-Five ELG's | Five and Older ELG's | N/A | Describe |
|---------------------|----------------------|---------------------|----------------------|-----|----------|
| age children) | | | | | |

Pathways to Excellence for Child Care Programs through Program Quality Improvement Activities (Component #3)

A3.1 Progress on Overall Goals

A3.1.1 Based on the goals described in the Lead Agency's CCDF Plan at Section 3.3.9, please report your progress.

You may include any significant areas of progress that that were not anticipated in the Plan, as well. For each goal listed, briefly describe the improvement with specific examples or numeric targets where possible (e.g., Expanded the number of programs included in the QRIS, Aligned the QRIS standards with Head Start performance standards, or expanded the number of programs with access to an on-site quality consultant). If applicable, describe any barriers to implementing your planned goals.

| Goals Described in FY 2014-2015 CCDF Plan | Describe Progress – Include Examples and Numeric Targets where Possible |
|---|---|
| | |
| | |

A3.2 Key Data

OCC is collecting this information as one part of our overall effort to better understanding State/Territory activities to improve the quality of child care. OCC recognizes that the data requested in this report will only provide part of that picture because there are many factors which affect the data being collected here. Each State/Territory's policy context and priorities and standards will play a role in the way that quality improvement activities are developed and implemented. OCC intends to work with the States/Territories to gather any additional contextual information necessary in order to fully understand the context of these data for any reporting activities involving this information.

A3.2.1 Number of Program Receiving Targeted Technical Assistance

Targeted technical assistance is technical assistance (coaching, mentoring and consultation) that is designed to address a particular domain/area of quality. Responses in this section should be consistent with responses provided in question 3.3.2 in the CCDF Plan which focuses on targeted technical assistance to programs

(rather than practitioners) that is intended for moving programs to higher levels of quality.

- c) How many programs received targeted technical assistance during the last fiscal year (October 1, 2013 through September 30, 2014)?

☐ N/A

Describe:

- d) If possible, report the number of programs who received targeted technical assistance in the following areas:

Health and safety

Infant and toddler care

School-age care

Inclusion

Teaching dual language learners

Understanding developmental screenings and/or observational assessment tools for program improvement purposes

Mental health

Business management practices

☐ N/A

Describe:

A3.2.2 Number of Programs Receiving Financial Supports

Responses to this question should be consistent with responses provided in question 3.3.3 of the CCDF Plan. **Financial supports** must be intended to reward, improve, or sustain quality. They can include grants, cash, reimbursements, gift cards, or purchases made to benefit a program. This includes tiered reimbursements for CCDF subsidies. **One-time grants, awards, or bonuses** include any kind of financial support that a program can receive only once. **On-going or periodic quality stipends** include any kind of financial support intended to reward, improve, or sustain quality that a program can receive more than once.

- a) How many programs received one-time, grants, awards or bonuses?

Child Care Centers

☐ N/A

Describe:

Family Child Care Homes

☐ N/A

Describe:

- b) How many programs received on-going or periodic quality stipends?

Child Care Centers

☐ N/A

Describe:

Family Child Care Homes

☐ N/A

Describe:

A3.2.3 Number of Eligible Programs for State/Territory QRIS or Other Quality Improvement System

- d) What is the total number of eligible child care centers for QRIS _____ OR Other Quality Improvement System? _____
☐ N/A
Describe: _____
- e) What is the total number of eligible family child care homes for QRIS _____ OR Other Quality Improvement System? _____
☐ N/A
Describe: _____
- f) What is the total number of eligible license-exempt providers for QRIS _____ OR Other Quality Improvement System? _____
☐ N/A
Describe: _____

A3.2.4 Number and Percentage of Programs Participating in State/Territory QRIS or Other Quality Improvement System

- d) Of the total number eligible as reported in A3.2.3, what is the total number and percentage of child care center programs in the State/Territory that participate in the State/Territory QRIS or other quality improvement system for programs over the last fiscal year?
- Number of Child Care Centers Participating in QRIS _____ OR Other Quality Improvement System _____
- Percentage of Child Care Centers Participating in QRIS _____ OR Other Quality Improvement System _____
☐ N/A
Describe: _____
- e) Of the total number eligible as reported in A3.2.3, what is the total number and percentage of family child care programs in the State/Territory that participate in the State/Territory QRIS or other quality improvement system for programs over the last fiscal year?
- Number of Family Child Care Homes QRIS _____ OR Other Quality Improvement System _____
- Percentage of Family Child Care Homes QRIS _____ OR Other Quality Improvement System _____
☐ N/A
Describe: _____
- f) Of the total number eligible as reported in A3.2.3, what is the total number and percentage of license-exempt programs in the State/Territory that

participate in the State/Territory QRIS or other quality improvement system for programs over the last fiscal year?

Number of License-Exempt Providers QRIS _____ OR Other Quality Improvement System _____

Percentage of License-Exempt Providers QRIS _____ OR Other Quality Improvement System _____

☐ N/A

Describe: _____

A3.2.5. Number of Programs at Each Level of Quality

For each type of care, provide the total number of quality levels and the number of programs at that level of the total number of participating as reported in A3.2.4. Describe metric if other than QRIS, such as accreditation.

| | Number of levels of quality | Number of programs at each level | N/A | Describe |
|--------------------------|-----------------------------|----------------------------------|--------------------------|----------|
| Child Care Centers | _____ | _____ | <input type="checkbox"/> | _____ |
| Family Child Care Homes | _____ | _____ | <input type="checkbox"/> | _____ |
| License-Exempt Providers | _____ | _____ | <input type="checkbox"/> | _____ |

A3.2.6 Number of Programs Who Moved Up or Down within QRIS

If quality threshold is something other than QRIS, describe the metric used, such as accreditation. These numbers ARE NOT expected to total the number of participating programs in the QRIS as reported in A3.2.4.

| | How many programs moved up within the QRIS or achieved another quality threshold established by the State/Territory over the last fiscal year? | How many programs moved down within the QRIS or achieved another quality threshold established by the State/Territory over the last fiscal year? | N/A | Describe |
|--------------------------|--|--|--------------------------|----------|
| Child Care Centers | _____ | _____ | <input type="checkbox"/> | _____ |
| Family Child Care Homes | _____ | _____ | <input type="checkbox"/> | _____ |
| License-Exempt Providers | _____ | _____ | <input type="checkbox"/> | _____ |

A3.2.7 Number of CCDF Subsidized Children Served in Programs Participating in the State/Territory Quality Improvement System

Note. If the State/Territory does not have a formal QRIS, the State/Territory may define another quality indicator and report it here.

- c) What percentage of CCDF children were served in participating programs during the last fiscal year? _____
- d) What percentage of CCDF children were served in high quality care as defined by the State/Territory? _____ Provide the definition of high quality care in the Describe box. This may include assessment scores, accreditation, or other metric, if no QRIS.

☐ N/A

Describe:

Pathways to Excellence for the Child Care Workforce: Professional Development Systems and Workforce Initiatives (Component #4)

A4.1 Progress on Overall Goals

A4.1.1 Based on the goals described in the Lead Agency's CCDF Plan at Section 3.4.7, please report your progress.

You may include any significant areas of progress that that were not anticipated in the Plan, as well. For each goal listed, briefly describe the improvement with specific examples or numeric targets where possible (e.g., Implement a wage supplement program, Develop articulation agreements). If applicable, describe any barriers to implementing your planned goals.

| Goals Described in FY 2014-2015 CCDF Plan | Describe Progress – Include Examples and Numeric Targets where Possible |
|--|--|
| | |
| | |

A4.2 Key Data

OCC is collecting this information as one part of our overall effort to better understanding State/Territory activities to improve the quality of child care. OCC recognizes that the data requested in this report will only provide part of that picture because there are many factors which affect the data being collected here. Each State/Territory's policy context and priorities and standards will play a role in the way that quality improvement activities are developed and implemented. OCC intends to work with the States/Territories to gather any additional contextual

information necessary in order to fully understand the context of these data for any reporting activities involving this information.

A4.2.1 Number of Teachers/Caregivers and Qualification Levels

- d) What is the total number of child care center teachers in the State/Territory as of September 30, 2014? _____
☐ N/A
 Describe:
- e) What is the total number of family child care providers in the State/Territory as of September 30, 2014? _____
☐ N/A
 Describe:
- f) What is the number of center teachers and family child care providers by qualification level as of the end of the last fiscal year? Count only the highest level of education attained.

| | Child Care Center Teachers | Family Child Care Providers | N/A | Describe |
|-----------------------------------|----------------------------|-----------------------------|--------------------------|----------|
| Child Development Associate (CDA) | _____ | _____ | <input type="checkbox"/> | _____ |
| State/Territory Credential | _____ | _____ | <input type="checkbox"/> | _____ |
| Associate's degree | _____ | _____ | <input type="checkbox"/> | _____ |
| Bachelor's degree | _____ | _____ | <input type="checkbox"/> | _____ |
| Graduate/Advanced degree | _____ | _____ | <input type="checkbox"/> | _____ |

A4.2.2 Number of Individuals Included in State/Territory's Professional Development Registry during Last Fiscal Year (October 1, 2013 through September 30, 2014)

Teachers in child care centers _____
 Family child care home providers _____
 License-exempt providers _____
☐ N/A
 Describe:

A4.2.3 Number of Individuals Receiving Credit-Based Training and/or Education as defined by State/Territory during the last fiscal year

Teachers in child care centers _____
 Family child care home providers _____
 License-exempt providers _____
☐ N/A
 Describe:

A4.2.4 Number of Credentials and Degrees Awarded during Last Fiscal Year

If possible, list the type of credential or degree and in what type of setting the practitioner worked.

| Setting | List Type of Credential and Provide Number Awarded | List Type of Degree and Provide Number Awarded | N/A | Describe |
|----------------------------------|--|--|--------------------------|----------|
| Teachers in child care centers | _____ | _____ | <input type="checkbox"/> | _____ |
| Family child care home providers | _____ | _____ | <input type="checkbox"/> | _____ |
| License-exempt providers | _____ | _____ | <input type="checkbox"/> | _____ |

A4.2.5 Number of Individuals Receiving Technical Assistance during Last Fiscal Year

Describe any data you track on coaching, mentoring, or other specialist consultation. If possible, include in what type of setting the practitioner worked. Responses to this question should be consistent with information provided in question 3.4.4e of the CCDF Plan.

| Setting | List Type of Technical Assistance and Provide Number | N/A | Describe |
|----------------------------------|--|--------------------------|----------|
| Teachers in child care centers | _____ | <input type="checkbox"/> | _____ |
| Family child care home providers | _____ | <input type="checkbox"/> | _____ |
| License-exempt providers | _____ | <input type="checkbox"/> | _____ |

A4.2.6 Type of Financial Supports Provided and Number of Teachers/Providers Receiving as of End of Last Fiscal Year?

- ☐ Scholarships. How many teachers/providers received? _____
- ☐ Reimbursement for Training Expenses. How many teachers/providers received? _____
- ☐ Loans. How many teachers/providers received? _____
- ☐ Wage supplements. How many teachers/providers received? _____
- ☐ Other. Describe
- ☐ N/A
- Describe:

Building Subsidy Systems that Increase Access to High Quality Care

In this section, Lead Agencies provide progress on their subsidy administration goals over the past year as of September 30, 2014.

A5.1 Progress on Overall Goals

Based on the goals described in the Lead Agency's CCDF Plan at Section 2.8, please report your progress using the chart below. You may include any significant areas of progress that were not anticipated in the Plan, as well. For each goal listed, briefly describe the improvement with specific examples or numeric targets where possible (e.g., established copayment policies that sustain income and sustain quality, or established eligibility policies that promote continuity of care). If applicable, describe any barriers to implementing your planned goals.

| Goals Described in FY 2014-2015 CCDF Plan | Describe Progress – Include Examples and Numeric Targets where Possible |
|--|--|
| | |
| | |

| |
|--|
| <p style="text-align: center;">APPENDIX 2 CCDF PROGRAM ASSURANCES AND CERTIFICATIONS</p> |
|--|

The Lead Agency, named in Part 1 of this Plan, assures (§98.15) that:

- (1) upon approval, it will have in effect a program that complies with the provisions of the Plan printed herein, and is administered in accordance with the Child Care and Development Block Grant Act of 1990 as amended, Section 418 of the Social Security Act, and all other applicable Federal laws and regulations. (658D(b), 658E(a))
- (2) the parent(s) of each eligible child within the State who receives or is offered child care services for which financial assistance is provided is given the option either to enroll such child with a child care provider that has a grant or contract for the provision of the service; or to receive a child care certificate. (658E(c)(2)(A)(i))
- (3) in cases in which the parent(s) elects to enroll the child with a provider that has a grant or contract with the Lead Agency, the child will be enrolled with the eligible provider selected by the parent to the maximum extent practicable. (658E(c)(2)(A)(ii))
- (4) the child care certificate offered to parents shall be of a value commensurate with the subsidy value of child care services provided under a grant or contract. (658E(c)(2)(A)(iii))
- (8) with respect to State and local regulatory requirements, health and safety requirements, payment rates, and registration requirements, State or local rules, procedures or other requirements promulgated for the purpose of the Child Care and Development Fund will not significantly restrict parental choice among categories of care or types of providers. (658E(c)(2)(A), §98.15(p), §98.30(g), §98.40(b)(2), §98.41(b), §98.43(c), §98.45(d))
- (9) that children receiving services under the CCDF are age-appropriately immunized, and that the health and safety provisions regarding immunizations incorporate (by reference or otherwise) the latest recommendation for childhood immunizations of the State public health agency. (§98.41(a)(1))
- (10) that CCDF Discretionary funds are used to supplement, not supplant, State general revenue funds for child care assistance for low-income families. (P.L. 109-149)

The Lead Agency also certifies that:

- (1) it has procedures in place to ensure that providers of child care services for which assistance is provided under the Child Care and Development Fund afford parents unlimited access to their children and to the providers caring for their children during the normal hours of operations and whenever such children are in the care of such providers. (658E(c)(2)(B))

- (2) it maintains a record of substantiated parental complaints and makes information regarding such complaints available to the public on request. (658E(c)(2)(C))
- (3) it will collect and disseminate to parents of eligible children and the general public consumer education information that will promote informed child care choices. (658E(c)(2)(D))
- (4) it has in effect licensing requirements applicable to child care services provided in the State. (658E(c)(2)(E))
- (8) there are in effect within the State (or other area served by the Lead Agency), under State or local law, requirements designed to protect the health and safety of children; these requirements are applicable to child care providers that provide services for which assistance is made available under the Child Care and Development Fund. (658E(c)(2)(E))
- (9) procedures are in effect to ensure that child care providers of services for which assistance is provided under the Child Care and Development Fund comply with all applicable State or local health and safety requirements. (658E(c)(2)(G))
- (10) payment rates under the Child Care and Development Fund for the provision of child care services are sufficient to ensure equal access for eligible children to comparable child care services in the State or sub-State area that are provided to children whose parents are not eligible to receive assistance under this program or under any other Federal or State child care assistance programs. (658E(c)(4)(A))

CCDF Regulations 45 CFR §98.13(b)(2)-(6) require the following certifications.

- 7. [Assurance of compliance with Title VI of the Civil Rights Act of 1964](#)
- 8. [Certification regarding debarment](#)
- 9. [Definitions for use with certification of debarment](#)
- 10. [HHS certification regarding drug-free workplace requirements](#)
- 11. [Certification of Compliance with the Pro-Children Act of 1994](#)
- 12. [Certification regarding lobbying](#)

These certifications were obtained in the 1997 Plan and need not be collected again if there has been no change in Lead Agency. If there has been a change in Lead Agency, these certifications must be completed and submitted with the Plan.